

Fill in this information to identify the case:

United States Bankruptcy Court for the:

Northern District of Illinois

Case number (if known): Chapter 11

☐ Check if this is an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

06/22

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name

Coast to Coast Leasing, LLC

2. All other names debtor used in the last 8 years

Include any assumed names, trade names, and *doing business as* names

3. Debtor's federal Employer Identification Number (EIN)

8 5 - 4 2 4 4 6 7 0

4. Debtor's address

Principal place of business

Mailing address, if different from principal place of business

566 Rock Road Dr - Unit #3

Number Street

East Dundee, IL 60118-2447

City State ZIP Code

Kane

County

Number Street

City State ZIP Code

Location of principal assets, if different from principal place of business

Number Street

City State ZIP Code

5. Debtor's website (URL)

6. Type of debtor

- ☐ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))
- ☐ Partnership (excluding LLP)
- ☒ Other. Specify: Limited Liability Company

Debtor Coast to Coast Leasing, LLC
Name

Case number (if known) _____

7. Describe debtor's business

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Railroad (as defined in 11 U.S.C. § 101(44))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
☒ None of the above

B. Check all that apply:

- ☐ Tax-exempt entity (as described in 26 U.S.C. § 501)
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

4 8 4 1

8. Under which chapter of the Bankruptcy Code is the debtor filing?

A debtor who is a "small business debtor" must check the first subbox. A debtor as defined in § 1182(1) who elects to proceed under subchapter V of chapter 11 (whether or not the debtor is a "small business debtor") must check the second sub-box

Check one:

- ☐ Chapter 7
☐ Chapter 9

☒ Chapter 11. **Check all that apply:**

- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11.** If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

- ☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

If more than 2 cases, attach a separate list.

☒ No

☐ Yes. District _____ When _____ Case number _____
MM / DD / YYYY
District _____ When _____ Case number _____
MM / DD / YYYY

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

List all cases. If more than 1, attach a separate list.

☒ No

☐ Yes. Debtor _____ Relationship _____
District _____ When _____
MM / DD / YYYY
Case number, if known _____

Debtor Coast to Coast Leasing, LLC Case number (if known) _____
Name

11. Why is the case filed in this district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☒ No

☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.
What is the hazard?

☐ It needs to be physically secured or protected from the weather.

☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

☐ Other _____

Where is the property? _____

Number Street

City

State

ZIP Code

Is the property insured?

☐ No

☐ Yes. Insurance agency _____
Contact name _____
Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds?

Check one:

- ☐ Funds will be available for distribution to unsecured creditors.
- ☒ After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

14. Estimated number of creditors

- ☒ 1-49 ☐ 50-99 ☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 25,001-50,000 ☐ 50,000-100,000
- ☐ 100-199 ☐ 200-999 ☐ 10,001-25,000 ☐ More than 100,000

15. Estimated assets

- ☐ \$0-\$50,000 ☒ \$1,000,001-\$10 million ☐ \$500,000,001-\$1 billion
- ☐ \$50,001-\$100,000 ☐ \$10,000,001-\$50 million ☐ \$1,000,000,001-\$10 billion
- ☐ \$100,001-\$500,000 ☐ \$50,000,001-\$100 million ☐ \$10,000,000,001-\$50 billion
- ☐ \$500,001-\$1 million ☐ \$100,000,001-\$500 million ☐ More than \$50 billion

Debtor Coast to Coast Leasing, LLC Case number (if known) _____
Name

16. Estimated liabilities

- | | | |
|--|---|--|
| <input type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input checked="" type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

Request for Relief, Declaration, and Signatures

WARNING --

Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

- The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.
- I have been authorized to file this petition on behalf of the debtor.
- I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 03/01/2024
MM/ DD/ YYYY

X

/s/ Hristo Angelov

Signature of authorized representative of debtor

Hristo Angelov

Printed name

Title Member

18. Signature of attorney

X

/s/ David P Leibowitz

Signature of attorney for debtor

Date 03/01/2024

MM/ DD/ YYYY

David P Leibowitz

Printed name

Law Offices of David P. Leibowitz, LLC

Firm name

3478 N Broadway St Unit 234

Number Street

Chicago

City

IL

State

60657-6968

ZIP Code

(312) 662-5750

Contact phone

dleibowitz@lakelaw.com

Email address

1612271

Bar number

IL

State

Fill in this information to identify the case:

Debtor Name Coast to Coast Leasing, LLC

United States Bankruptcy Court for the: Northern District of Illinois
(State)

Case number (if known): _____

☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets — Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☒ No. Go to Part 2.
☐ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

2. Cash on hand

3. Checking, savings, money market, or financial brokerage accounts (*Identify all*)

Name of institution (bank or brokerage firm) Type of account Last 4 digits of account number

3.1. _____

3.2. _____

4. Other cash equivalents (*Identify all*)

4.1 _____

4.2 _____

5. Total of Part 1

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

Part 2: Deposits and prepayments

6. Does the debtor have any deposits or prepayments?

- ☒ No. Go to Part 3.
☐ Yes. Fill in the information below.

Current value of debtor's interest

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

7.1 _____

Debtor Coast to Coast Leasing, LLC Case number (if known) _____
Name

7.2 _____

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

8.1 _____

8.2 _____

9. Total of Part 2

Add lines 7 through 8. Copy the total to line 81.

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- ☒ No. Go to Part 4.
☐ Yes. Fill in the information below.

Current value of
debtor's interest

11. Accounts receivable

11a. 90 days old or less: _____ - _____ = →
face amount doubtful or uncollectible accounts

11b. Over 90 days old: _____ - _____ = →
face amount doubtful or uncollectible accounts

12. Total of Part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

Part 4: Investments

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.
☐ Yes. Fill in the information below.

Valuation method used
for current value

Current value of
debtor's interest

14. Mutual funds or publicly traded stocks not included in Part 1

Name of fund or stock:

14.1 _____

14.2 _____

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity:

% of
ownership:

15.1. _____

15.2. _____

Debtor Coast to Coast Leasing, LLC Case number (if known) _____
Name

16. **Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**

Describe:

16.1 _____

16.2 _____

17. **Total of Part 4**

Add lines 14 through 16. Copy the total to line 83.

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Part 5: Inventory, excluding agriculture assets

18. **Does the debtor own any inventory (excluding agriculture assets)?**

☒ No. Go to Part 6.

☐ Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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19. **Raw materials**

_____ MM / DD / YYYY _____

20. **Work in progress**

_____ MM / DD / YYYY _____

21. **Finished goods, including goods held for resale**

_____ MM / DD / YYYY _____

22. **Other inventory or supplies**

_____ MM / DD / YYYY _____

23. **Total of Part 5**

Add lines 19 through 22. Copy the total to line 84.

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24. **Is any of the property listed in Part 5 perishable?**

☒ No

☐ Yes

25. **Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**

☒ No

☐ Yes. Book value _____ Valuation method _____ Current value _____

26. **Has any of the property listed in Part 5 been appraised by a professional within the last year?**

☒ No

☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

Debtor Coast to Coast Leasing, LLC Case number (if known) _____
Name

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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28. Crops—either planted or harvested

29. Farm animals *Examples:* Livestock, poultry, farm-raised fish

30. Farm machinery and equipment (Other than titled motor vehicles)

31. Farm and fishing supplies, chemicals, and feed

32. Other farming and fishing-related property not already listed in Part 6

33. Total of Part 6

Add lines 28 through 32. Copy the total to line 85.

34. Is the debtor a member of an agricultural cooperative?

- ☒ No
☐ Yes. Is any of the debtor's property stored at the cooperative?
☐ No
☐ Yes

35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?

- ☒ No
☐ Yes. Book value _____ Valuation method _____ Current value _____

36. Is a depreciation schedule available for any of the property listed in Part 6?

- ☒ No
☐ Yes

37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☒ No. Go to Part 8.
☐ Yes. Fill in the information below.

Debtor Coast to Coast Leasing, LLC Case number (if known) _____
Name

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture			
40. Office fixtures			
41. Office equipment, including all computer equipment and communication systems equipment and software			
42. Collectibles <i>Examples:</i> Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
42.1			
42.2			
42.3			
43. Total of Part 7 Add lines 39 through 42. Copy the total to line 86.			
44. Is a depreciation schedule available for any of the property listed in Part 7? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
45. Has any of the property listed in Part 7 been appraised by a professional within the last year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles? <input type="checkbox"/> No. Go to Part 9. <input checked="" type="checkbox"/> Yes. Fill in the information below.			
General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1 2023 Utility / VIN: See Ex A 32 Utility Trucks - Triumph Loan ending 5510 - @\$52,000	unknown		\$1,716,000.00
47.2 2020 Kenworth / VIN: See Exhibit A 12 2020 Kenworth Tractors @\$20,000	unknown		\$240,000.00
47.3 2020 Freightliner / VIN: See Exhibit A Attached 12 Vehicles	unknown		\$418,000.00

Debtor Coast to Coast Leasing, LLC Case number (if known) _____
 Name _____

47.4	<u>2020 Freightliner / VIN: See Exhibit A Attached 14 vehicles</u>	<u>unknown</u>	<u>\$477,000.00</u>
47.5	<u>2020 Freightliner / VIN: See Exhibit A Attached 14</u>	<u>unknown</u>	<u>\$503,000.00</u>
47.6	<u>2020 Freightliner / VIN: See Exhibit A 8 vehciles</u>	<u>unknown</u>	<u>\$264,000.00</u>
47.7	<u>2024 Utility / VIN: See Exhibit A 10</u>	<u>unknown</u>	<u>\$650,000.00</u>
47.8	<u>2020 Freightliner / VIN: See Exhibit A Attached 5 vehciles</u>	<u>unknown</u>	<u>\$157,000.00</u>
47.9	<u>2024 CIMC / VIN: See Exhibit A Attached 7</u>	<u>unknown</u>	<u>\$455,000.00</u>
47.10	<u>2024 Utility / VIN: See Exhibit A Attached 4 vehicles</u>	<u>unknown</u>	<u>\$260,000.00</u>
47.11	<u>2024 Utility / VIN: See Exhibit A Attached 3 vehicles</u>	<u>unknown</u>	<u>\$195,000.00</u>
47.12	<u>2023 Utility / VIN: see Exhibit A Attached 2 vehicles</u>	<u>unknown</u>	<u>\$104,000.00</u>
47.13	<u>2024 CIMS / VIN: See Exhibit A Attached 10 vehicles</u>	<u>unknown</u>	<u>\$650,000.00</u>
47.14	<u>2023 Utility / VIN: See Exhibit A Attached 2 vehicles</u>	<u>unknown</u>	<u>\$104,000.00</u>
47.15	<u>2023 Utility / VIN: See Exhibit A Attached 2 vehicles</u>	<u>unknown</u>	<u>\$104,000.00</u>
47.16	<u>2023 Utility / VIN: See Exhibit A Attached 4 vehicles</u>	<u>unknown</u>	<u>\$208,000.00</u>
47.17	<u>Freightliner / VIN: See Exhibit A Attached 4 vehicles various years</u>	<u>unknown</u>	<u>\$82,000.00</u>
47.18	<u>2023 Utility / VIN: See Exhibit A Attached 5 vehciels</u>	<u>unknown</u>	<u>\$260,000.00</u>
47.19	<u>2019 Freightliner / VIN: see Exhibit A 5 vehielce</u>	<u>unknown</u>	<u>\$113,000.00</u>
47.20	<u>2019 Freightliner / VIN: See exhibit A attached 6 vehciels</u>	<u>unknown</u>	<u>\$113,000.00</u>
47.21	<u>VIN: See Exhibit A attached - one may be totalled 9 Volvo 1 Great Dane 1 Utility</u>	<u>unknown</u>	<u>\$239,000.00</u>
47.22	<u>2017-2018 Freightliners / VIN: See Exhibit A Attached 12 Vehicles</u>	<u>unknown</u>	<u>\$149,000.00</u>
47.23	<u>VIN: See Exhibit A Attached 15 Vehicles - various makes</u>	<u>unknown</u>	<u>\$323,000.00</u>
47.24	<u>2020 Utility / VIN: See Exhibit A Attached 20 vehicles</u>	<u>unknown</u>	<u>\$300,000.00</u>
47.25	<u>VIN: See Exhibit A Attached 16 vehicles - various makes and models</u>	<u>unknown</u>	<u>\$167,000.00</u>
47.26	<u>2023 Utility / VIN: See Exhibit A Attached 10 vehciels</u>	<u>unknown</u>	<u>\$520,000.00</u>
47.27	<u>2021 Freightliner / VIN: See Exhibit A Attached 11 vehicles</u>	<u>unknown</u>	<u>\$534,000.00</u>
47.28	<u>Utility VS2RA / 5 Utility Reefer Trailers</u>	<u>unknown</u>	<u>\$260,000.00</u>
47.29	<u>Motor vehicle</u>	<u>unknown</u>	<u>\$424,000.00</u>
48.	Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels		
48.1	_____	_____	_____
48.2	_____	_____	_____
49.	Aircraft and accessories		
49.1	_____	_____	_____

Debtor Coast to Coast Leasing, LLC Case number (if known) _____
Name

49.2 _____

50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**

51. **Total of Part 8**

Add lines 47 through 50. Copy the total to line 87.

\$9,989,000.00

52. **Is a depreciation schedule available for any of the property listed in Part 8?**

☐ No

☒ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

☐ No

☒ Yes

Part 9: Real property

54. **Does the debtor own or lease any real property?**

☒ No. Go to Part 10.

☐ Yes. Fill in the information below.

55. **Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

Description and location of property

Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.

Nature and extent of debtor's interest in property

Net book value of debtor's interest
(Where available)

Valuation method used for current value

Current value of debtor's interest

55.1 _____

55.2 _____

55.3 _____

55.4 _____

55.5 _____

55.6 _____

56. **Total of Part 9**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

57. **Is a depreciation schedule available for any of the property listed in Part 9?**

☒ No

☐ Yes

58. **Has any of the property listed in Part 9 been appraised by a professional within the last year?**

☒ No

☐ Yes

Part 10: Intangibles and intellectual property

Debtor Coast to Coast Leasing, LLC Case number (if known) _____
Name

59. Does the debtor have any interests in intangibles or intellectual property?

- ☒ No. Go to Part 11.
☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets			
61. Internet domain names and websites			
62. Licenses, franchises, and royalties			
63. Customer lists, mailing lists, or other compilations			
64. Other intangibles, or intellectual property			
65. Goodwill			

66. Total of Part 10

Add lines 60 through 65. Copy the total to line 89.

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☒ No
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☒ No
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
☒ Yes. Fill in the information below.

Current value of
debtor's interest

Debtor Coast to Coast Leasing, LLC Case number (if known) _____
Name

71. **Notes receivable**

Description (include name of obligor)

_____ - _____ = **→** _____
Total face amount doubtful or uncollectible amount

72. **Tax refunds and unused net operating losses (NOLs)**

Description (for example, federal, state, local)

_____ Tax year _____
_____ Tax year _____
_____ Tax year _____

73. **Interests in insurance policies or annuities**

74. **Causes of action against third parties (whether or not a lawsuit has been filed)**

Nature of claim _____

Amount requested _____

75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**

Nature of claim _____

Amount requested _____

76. **Trusts, equitable or future interests in property**

77. **Other property of any kind not already listed** Examples: Season tickets, country club membership

Quickbooks Software unknown

78. **Total of Part 11**

Add lines 71 through 77. Copy the total to line 90.

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**

☒ No

☐ Yes

Debtor Coast to Coast Leasing, LLC Case number (if known) _____
Name

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i>	_____	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	_____	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	_____	
83. Investments. <i>Copy line 17, Part 4.</i>	_____	
84. Inventory. <i>Copy line 23, Part 5.</i>	_____	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	_____	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	_____	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$9,989,000.00</u>	
88. Real property. <i>Copy line 56, Part 9.</i> →		<div>_____</div>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	_____	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ <u>unknown</u>	
91. Total. <i>Add lines 80 through 90 for each column.</i>91a.	<div><u>\$9,989,000.00</u></div>	+ 91b. <div>_____</div>
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.		<div><u>\$9,989,000.00</u></div>

Fill in this information to identify the case:

Debtor name Coast to Coast Leasing, LLC

United States Bankruptcy Court for the: Northern District of Illinois
(State)

Case number (if known): _____

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A
Amount of claim
Do not deduct the value of collateral.

Column B
Value of collateral that supports this claim

2.1 Creditor's name

Amur Equipment Finance, Inc

Describe debtor's property that is subject to a lien

2024 Utility

\$321,049.00

\$195,000.00

Creditor's mailing address

PO Box 202136

Describe the lien

Florence, SC 29502

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Is anyone else liable on this claim?

- ☒ No
☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H).

Date debt was incurred

Last 4 digits of account number 2 9 3 6

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Do multiple creditors have an interest in the same property?

- ☒ No
☐ Yes. Specify each creditor, including this creditor, and its relative priority.

Remarks: Trailers
we are personal guarantee

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$19,167,713.12

Debtor Coast to Coast Leasing, LLC
Name _____

Case number (if known) _____

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value
of collateral.

Column B

**Value of collateral
that supports this
claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.2	Creditor's name <u>BMO</u>	Describe debtor's property that is subject to a lien <u>12024 CIMS</u>	<u>\$830,000.00</u>	<u>\$650,000.00</u>
	Creditor's mailing address <u>PO Box 3040</u> <u>Cedar Rapids, IA 52406</u>	Describe the lien _____		
	Creditor's email address, if known _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Date debt was incurred _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).		
	Last 4 digits of account number <u>6</u> <u>0</u> <u>0</u> <u>1</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____			
	Remarks: Trailers We are personal guarantee			

Debtor Coast to Coast Leasing, LLC
Name _____

Case number (if known) _____

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value
of collateral.

Column B

**Value of collateral
that supports this
claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.3	Creditor's name <u>Crossroads Equipment Lease & Finance</u>	Describe debtor's property that is subject to a lien <u>2020 Freightliner</u>	<u>\$266,848.61</u>	<u>\$157,000.00</u>
	Creditor's mailing address <u>9385 Haven Ave.,</u> <u>Rancho Cucamonga, CA 91730</u>	Describe the lien _____		
	Creditor's email address, if known _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Date debt was incurred _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).		
	Last 4 digits of account number <u>3</u> <u>9</u> <u>6</u> <u>8</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____			
	Remarks: Trucks We are personal guarantee			

Debtor Coast to Coast Leasing, LLC
Name _____

Case number (if known) _____

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value
of collateral.

Column B

**Value of collateral
that supports this
claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.4	Creditor's name <u>Crossroads Equipment Lease & Finance</u>	Describe debtor's property that is subject to a lien <u>2023 Utility</u>	<u>\$191,200.27</u>	<u>\$104,000.00</u>
	Creditor's mailing address <u>9385 Haven Ave.,</u> <u>Rancho Cucamonga, CA 91730</u>	Describe the lien _____		
	Creditor's email address, if known _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Date debt was incurred _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).		
	Last 4 digits of account number <u>1</u> <u>6</u> <u>2</u> <u>2</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____			
	Remarks: Trailers we are personal Guarantee			

Debtor Coast to Coast Leasing, LLC
Name _____

Case number (if known) _____

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value
of collateral.

Column B

**Value of collateral
that supports this
claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.5	Creditor's name <u>Crossroads Equipment Lease & Finance</u>	Describe debtor's property that is subject to a lien <u>2023 Utility</u>	<u>\$191,200.27</u>	<u>\$104,000.00</u>
	Creditor's mailing address <u>9385 Haven Ave.,</u> <u>Rancho Cucamonga, CA 91730</u>	Describe the lien _____		
	Creditor's email address, if known _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Date debt was incurred _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).		
	Last 4 digits of account number <u>1</u> <u>6</u> <u>2</u> <u>3</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____			
	Remarks: trailers We are personal Guarantee			

Debtor Coast to Coast Leasing, LLC
Name _____

Case number (if known) _____

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value
of collateral.

Column B

**Value of collateral
that supports this
claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.6	Creditor's name <u>Crossroads Equipment Lease & Finance</u>	Describe debtor's property that is subject to a lien <u>2023 Utility</u>	<u>\$363,035.26</u>	<u>\$208,000.00</u>
	Creditor's mailing address <u>9385 Haven Ave.,</u> <u>Rancho Cucamonga, CA 91730</u>	Describe the lien _____		
	Creditor's email address, if known _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Date debt was incurred _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).		
	Last 4 digits of account number <u>1</u> <u>6</u> <u>2</u> <u>4</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____			
	Remarks: Trailers We are Personal Guarantee			

Debtor Coast to Coast Leasing, LLC
Name

Case number (if known) _____

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value
of collateral.

Column B

**Value of collateral
that supports this
claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.7	Creditor's name <u>Crossroads Equipment Lease & Finance</u>	Describe debtor's property that is subject to a lien <u>2019 Freightliner</u>	<u>\$230,504.57</u>	<u>\$113,000.00</u>
	Creditor's mailing address <u>9385 Haven Ave.,</u> <u>Rancho Cucamonga, CA 91730</u>	Describe the lien _____		
	Creditor's email address, if known _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Date debt was incurred _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).		
	Last 4 digits of account number <u>2</u> <u>1</u> <u>5</u> <u>2</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____			
	Remarks: Trucks 1FUJHHDR4KLKL3636 1FUJHHDR7KLKE4089 1FUJHHDR2KLKE4470 1FUJHHDR6KLKE4469 1FUJHHDR1KSKE4285 We Are Personal Guarantee			

Debtor Coast to Coast Leasing, LLC
Name

Case number (if known) _____

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value
of collateral.

Column B

**Value of collateral
that supports this
claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.8	Creditor's name <u>Crossroads Equipment Lease & Finance</u>	Describe debtor's property that is subject to a lien <u>2019 Freightliner</u>	<u>\$230,504.57</u>	<u>\$113,000.00</u>
	Creditor's mailing address <u>9385 Haven Ave.,</u> <u>Rancho Cucamonga, CA 91730</u>	Describe the lien _____		
	Creditor's email address, if known _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Date debt was incurred _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).		
	Last 4 digits of account number <u>2</u> <u>1</u> <u>5</u> <u>3</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____			
	Remarks: Trucks 1FUJHHDRXKLKE3809 1FUJHHDR9KLKE4465 1FUJHHDR9KLKE4014 1FUJHHDR5KLKR3944 1FUJHHDR3KLKE4557 We Are personal Guarantee			

Debtor Coast to Coast Leasing, LLC
Name _____

Case number (if known) _____

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value
of collateral.

Column B

**Value of collateral
that supports this
claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.9	Creditor's name <u>DLL</u>	Describe debtor's property that is subject to a lien <u>2024 Utility</u>	<u>\$1,030,434.65</u>	<u>\$650,000.00</u>
	Creditor's mailing address <u>PO Box 41602</u> <u>Philadelphia, PA 19130</u>	Describe the lien _____		
	Creditor's email address, if known _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Date debt was incurred _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).		
	Last 4 digits of account number <u>7</u> <u>1</u> <u>7</u> <u>7</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____			
	Remarks: Trailers we are personal guarantee			

Debtor Coast to Coast Leasing, LLC Case number (if known) _____
Name

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value
of collateral.

Column B

**Value of collateral
that supports this
claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.10	Creditor's name <u>First Federal Savings Bank</u>	Describe debtor's property that is subject to a lien <u>9 Volvo 1 Great Dane 1 Utility</u>	<u>\$657,111.67</u>	<u>\$239,000.00</u>
	Creditor's mailing address <u>633 LaSalle St</u> <u>Ottawa, IL 61350</u>	Describe the lien _____		
	Creditor's email address, if known _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Date debt was incurred _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).		
	Last 4 digits of account number <u>0</u> <u>8</u> <u>6</u> <u>9</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____			
	Remarks: Trucks and 2 Trailers 4V4NC9EH1KN195262 4V4NC9EG8KN196254 4V4NC9EG9KN196263 4V4NC9EG7KN196262 4V4NC9EGXKN207755 4V4NC9EG1KN196273 4V4NC9EG0KN196264 1GRAA0625KW102801 1UYVS2536K6553011 We are personal Guarantee			

Debtor Coast to Coast Leasing, LLC Case number (if known) _____
Name _____

Part 1: Additional Page		<i>Column A</i> Amount of claim Do not deduct the value of collateral.	<i>Column B</i> Value of collateral that supports this claim
Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.			
2.11	Creditor's name <u>First Federal Savings Bank</u>	Describe debtor's property that is subject to a lien <u>2017-2018 Freightliners</u>	<u>\$276,578.65</u>
	Creditor's mailing address <u>633 LaSalle St</u> <u>Ottawa, IL 61350</u>	Describe the lien _____	<u>\$149,000.00</u>
	Creditor's email address, if known _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Date debt was incurred _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).	
	Last 4 digits of account number <u>0</u> <u>8</u> <u>8</u> <u>5</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		
	Remarks: Trucks 3AKJGLDRXHSHT2222 3AKJGLDR4HDHT2172 3AKJGLDR5HSHT2225 3AKJGLDR6HDHT2190 3AKJGLDRXHSHT2401 3AKJGLDR8HSHT2297 3AKJGLDR1HSHT2299 3AKJGLDR7HDHT2201 3AKJGLDR2HSHT2344 3AKJHHDR8JSKB5669 3AKJHHDR8JSKB5722 3AKJHHDR6JSKB5766 We are Personal Guarantee		

Debtor Coast to Coast Leasing, LLC
Name _____

Case number (if known) _____

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value
of collateral.

Column B

**Value of collateral
that supports this
claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.12	Creditor's name <u>First Federal Savings Bank</u>	Describe debtor's property that is subject to a lien <u>16 vehicles - various makes and models</u>	<u>\$508,806.80</u>	<u>\$167,000.00</u>
	Creditor's mailing address <u>633 LaSalle St</u> <u>Ottawa, IL 61350</u>	Describe the lien _____		
	Creditor's email address, if known _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Date debt was incurred _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).		
	Last 4 digits of account number <u>0</u> <u>8</u> <u>9</u> <u>3</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____			
	Remarks: Truck and Trailers and APU We are personal Guarantee			

Debtor Coast to Coast Leasing, LLC Case number (if known) _____
Name

Part 1: Additional Page		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.			
2.13	Creditor's name <u>Jules and Associates, Inc</u> Creditor's mailing address <u>Suite 1900</u> <u>515 South Figueroa Street</u> <u>Los Angeles, CA 90071</u> Creditor's email address, if known _____ Date debt was incurred _____ Last 4 digits of account number <u>3</u> <u>7</u> <u>3</u> <u>3</u> Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____ Remarks: Trucks we are personal guarantee	Describe debtor's property that is subject to a lien <u>2020 Freightliner</u> Describe the lien _____ Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$655,000.00</u> <u>\$264,000.00</u>

Debtor Coast to Coast Leasing, LLC
Name _____

Case number (if known) _____

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value
of collateral.

Column B

**Value of collateral
that supports this
claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.14	Creditor's name <u>KLC Financial, LLC</u>	Describe debtor's property that is subject to a lien <u>2024 Utility</u>	<u>\$383,065.15</u>	<u>\$260,000.00</u>
	Creditor's mailing address <u>PO.Box 2149</u> <u>Gig Harbor, WA 98335</u>	Describe the lien _____		
	Creditor's email address, if known _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Date debt was incurred _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).		
	Last 4 digits of account number <u>5</u> <u>3</u> <u>6</u> <u>2</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____			
	Remarks: Trailers We are personal guarantee			

Debtor Coast to Coast Leasing, LLC Case number (if known) _____
Name

Part 1: Additional Page		<i>Column A</i> Amount of claim Do not deduct the value of collateral.	<i>Column B</i> Value of collateral that supports this claim
Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.			
2.15	Creditor's name <u>People's United Equipment Finance Corp</u> Creditor's mailing address <u>Suite 175</u> <u>4225 Naperville Rd</u> <u>Lisle, IL 60532</u> Creditor's email address, if known _____ Date debt was incurred _____ Last 4 digits of account number <u>6</u> <u>2</u> <u>5</u> <u>2</u> Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____ Remarks: Trailers We are personal guarantee	Describe debtor's property that is subject to a lien <u>Utility VS2RA</u> Describe the lien _____ Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$369,914.22</u> <u>\$260,000.00</u>

Debtor Coast to Coast Leasing, LLC Case number (if known) _____
Name

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value
of collateral.

Column B

**Value of collateral
that supports this
claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.16	Creditor's name <u>People's United Equipment Finance Corp</u>	Describe debtor's property that is subject to a lien <u>2023 Utility</u>	<u>\$674,082.85</u>	<u>\$520,000.00</u>
	Creditor's mailing address <u>Suite 175</u> <u>4225 Naperville Rd</u> <u>Lisle, IL 60532</u>	Describe the lien _____ _____		
	Creditor's email address, if known _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Date debt was incurred _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).		
	Last 4 digits of account number <u>5</u> <u>6</u> <u>4</u> <u>3</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____			
	Remarks: Trailers We Are Personal Guarantee			

Debtor Coast to Coast Leasing, LLC Case number (if known) _____
Name

Part 1: Additional Page		<i>Column A</i> Amount of claim Do not deduct the value of collateral.	<i>Column B</i> Value of collateral that supports this claim
Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.			
2.17	Creditor's name <u>PNC Equipment Finance</u>	Describe debtor's property that is subject to a lien <u>2024 CIMC</u>	<u>\$766,128.30</u>
	Creditor's mailing address <u>Suite 250</u> <u>655 Business Center Dr</u> <u>Horsham, PA 19044</u>	Describe the lien _____	<u>\$455,000.00</u>
	Creditor's email address, if known _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Date debt was incurred _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).	
	Last 4 digits of account number <u>2</u> <u>2</u> <u>2</u> <u>1</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		
	Remarks: Trailers we are personal guarantee		

Debtor Coast to Coast Leasing, LLC Case number (if known) _____
Name

Part 1: Additional Page		<i>Column A</i> Amount of claim Do not deduct the value of collateral.	<i>Column B</i> Value of collateral that supports this claim
Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.			
2.18	Creditor's name <u>Siemens Financial Services, Inc</u>	Describe debtor's property that is subject to a lien <u>2020 Utility</u>	<u>\$1,302,912.88</u>
	Creditor's mailing address <u>Suite 200</u> <u>200 Wood Avenue South</u> <u>Iselin, NJ 08830</u>	Describe the lien _____	<u>\$300,000.00</u>
	Creditor's email address, if known _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Date debt was incurred _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).	
	Last 4 digits of account number <u>3</u> <u>4</u> <u>0</u> <u>5</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		
	Remarks: Trailers We are Personal Guarantee		

Debtor Coast to Coast Leasing, LLC Case number (if known) _____
Name

Part 1: Additional Page		<i>Column A</i> Amount of claim Do not deduct the value of collateral.	<i>Column B</i> Value of collateral that supports this claim
Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.			
2.19	Creditor's name <u>SUMITOMO MITSUI FINANCE AND LEASING CO</u> Creditor's mailing address <u>Floor 8th</u> <u>666 THIRD AVE</u> <u>New York, NY 10017</u> Creditor's email address, if known _____ Date debt was incurred _____ Last 4 digits of account number <u>6</u> <u>1</u> <u>4</u> <u>6</u> Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien <u>2021 Freightliner</u> Describe the lien _____ Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$844,218.36</u> <u>\$534,000.00</u>
Remarks: Trucks we are parsonal guarantee			

Debtor Coast to Coast Leasing, LLC Case number (if known) _____
Name

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value
of collateral.

Column B

**Value of collateral
that supports this
claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.20	Creditor's name <u>Triumph Commercial Finance</u>	Describe debtor's property that is subject to a lien <u>Motor vehicle</u>	<u>\$947,184.17</u>	<u>\$424,000.00</u>
	Creditor's mailing address <u>suite 1700</u> <u>12700 Parl Central Drive</u> <u>Dallas, TX 75251</u>	Describe the lien _____ Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).		
	Creditor's email address, if known _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Date debt was incurred _____			
	Last 4 digits of account number <u>7</u> <u>3</u> <u>9</u> <u>4</u>			
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____			
	Remarks: Trucks 1FUJHHDR4LLN1445 1FUJHHDR8LLN1464 1FUJHHDR0LLN1653 1FUJHHDR1LLN1726 1FUJHHDR9LLN1795 1FUJHHDR4LLN1851 1FUJHHDR7LLN1925 1FUJHHDR7LLN1973 1FUJHHDR4LLN1977 1FUJHHDR2LLN2111 1FUJHHDR2LLN2206 1FUJHHDR6LLN2239 We Are Personal Guarantee			

Debtor Coast to Coast Leasing, LLC Case number (if known) _____
Name

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value
of collateral.

Column B

**Value of collateral
that supports this
claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.21	Creditor's name <u>Triumph Commercial Finance</u>	Describe debtor's property that is subject to a lien <u>2020 Freightliner</u>	<u>\$1,119,174.13</u>	<u>\$477,000.00</u>
	Creditor's mailing address <u>1700</u> <u>12700 Parl Central Drive</u> <u>Dallas, TX 75251</u>	Describe the lien _____ _____		
	Creditor's email address, if known _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Date debt was incurred _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).		
	Last 4 digits of account number <u>6</u> <u>7</u> <u>0</u> <u>0</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____			
	Remarks: Truck some truck titles			

Debtor Coast to Coast Leasing, LLC Case number (if known) _____
Name

Part 1: Additional Page		<i>Column A</i> Amount of claim Do not deduct the value of collateral.	<i>Column B</i> Value of collateral that supports this claim
Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.			
2.22	Creditor's name <u>Triumph Commercial Finance</u>	Describe debtor's property that is subject to a lien <u>2023 Utility</u>	<u>\$2,877,765.79</u>
	Creditor's mailing address <u>suite 1700</u> <u>12700 Parl Central Drive</u> <u>Dallas, TX 75251</u>	Describe the lien _____	<u>\$1,716,000.00</u>
	Creditor's email address, if known _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Date debt was incurred _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).	
	Last 4 digits of account number <u>5</u> <u>5</u> <u>1</u> <u>0</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		
	Remarks: Trailers some truck Titles		

Debtor Coast to Coast Leasing, LLC
Name _____

Case number (if known) _____

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value
of collateral.

Column B

**Value of collateral
that supports this
claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.23	Creditor's name <u>Triumph Commercial Finance</u>	Describe debtor's property that is subject to a lien <u>2020 Kenworth</u>	<u>\$979,903.72</u>	<u>\$240,000.00</u>
	Creditor's mailing address <u>1700</u> <u>12700 Parl Central Drive</u> <u>Dallas, TX 75251</u>	Describe the lien _____ Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).		
	Creditor's email address, if known _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Date debt was incurred _____			
	Last 4 digits of account number <u>3</u> <u>5</u> <u>5</u> <u>6</u>			
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____			
	Remarks: KW Trucks Some truck Titles			

Debtor Coast to Coast Leasing, LLC Case number (if known) _____
Name

Part 1: Additional Page		<i>Column A</i> Amount of claim Do not deduct the value of collateral.	<i>Column B</i> Value of collateral that supports this claim
Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.			
2.24	Creditor's name <u>Triumph Commercial Finance</u> Creditor's mailing address <u>suite 1700</u> <u>12700 Parl Central Drive</u> <u>Dallas, TX 75251</u> Creditor's email address, if known _____ Date debt was incurred _____ Last 4 digits of account number <u>6</u> <u>6</u> <u>4</u> <u>2</u> Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____ Remarks: Trucks Some Truck titles	Describe debtor's property that is subject to a lien <u>2020 Freightliner</u> Describe the lien _____ Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$1,119,948.12</u> <u>\$503,000.00</u>

Debtor Coast to Coast Leasing, LLC Case number (if known) _____
Name

Part 1: Additional Page		<i>Column A</i> Amount of claim Do not deduct the value of collateral.	<i>Column B</i> Value of collateral that supports this claim
Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.			
2.25	Creditor's name <u>Triumph Commercial Finance</u> Creditor's mailing address <u>Suite 1700</u> <u>12700 Parl Central Drive</u> <u>Dallas, TX 75251</u> Creditor's email address, if known _____ Date debt was incurred _____ Last 4 digits of account number <u>9</u> <u>2</u> <u>2</u> <u>4</u> Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____ Remarks: Trucks We are personal Guarantee	Describe debtor's property that is subject to a lien <u>Freightliner</u> Describe the lien _____ Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$105,737.85</u> <u>\$82,000.00</u>

Debtor Coast to Coast Leasing, LLC Case number (if known) _____
Name

Part 1: Additional Page		<i>Column A</i> Amount of claim Do not deduct the value of collateral.	<i>Column B</i> Value of collateral that supports this claim
Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.			
2.26	Creditor's name <u>Triumph Commercial Finance</u>	Describe debtor's property that is subject to a lien <u>2020 Freightliner</u>	<u>\$945,805.67</u>
	Creditor's mailing address <u>suite 1700</u> <u>12700 Parl Central Drive</u> <u>Dallas, TX 75251</u>	Describe the lien _____ Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).	<u>\$418,000.00</u>
	Creditor's email address, if known _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date debt was incurred _____		
	Last 4 digits of account number <u>7</u> <u>4</u> <u>1</u> <u>8</u>		
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		
	Remarks: Trucks 1FUJHHDR3LLL2019 1FUJHHDR8LLL1352 1FUJHHDR5LLL1468 1FUJHHDR2LLL1475 1FUJHHDR0LLL1510 1FUJHHDR9LLL1635 1FUJHHDR6LLL1639 1FUJHHDR3LLL1727 1FUJHHDR5LLLS4691 1FUJHHDRXLLS4721 1FUJHHDRXLLN2065 1FUJHHDR8LLKV8251 We are personal Guarantee		

Debtor Coast to Coast Leasing, LLC Case number (if known) _____
Name

Part 1: Additional Page		<i>Column A</i> Amount of claim Do not deduct the value of collateral.	<i>Column B</i> Value of collateral that supports this claim
Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.			
2.27	Creditor's name <u>Triumph Commercial Finance</u>	Describe debtor's property that is subject to a lien <u>15 Vehicles - various makes</u>	<u>\$979,597.59</u>
	Creditor's mailing address <u>suite 1700</u> <u>12700 Parl Central Drive</u> <u>Dallas, TX 75251</u>	Describe the lien _____ Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).	<u>\$323,000.00</u>
	Creditor's email address, if known _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date debt was incurred _____		
	Last 4 digits of account number <u>3</u> <u>3</u> <u>6</u> <u>0</u>		
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		
	Remarks: Trucks We are Personal Guarantee		

Fill in this information to identify the case:

Debtor name Coast to Coast Leasing, LLC

United States Bankruptcy Court for the:

Northern District of Illinois

Case number (if known): _____

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507)

☒ No. Go to Part 2.

☐ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

2.1

Priority creditor's name and mailing address

Date or dates debt was incurred

Last 4 digits of account
number ____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) ____

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Is the claim subject to offset?

☐ No

☐ Yes

Total claim

Priority amount

2.2

Priority creditor's name and mailing address

Date or dates debt was incurred

Last 4 digits of account
number ____

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) ____

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Is the claim subject to offset?

☐ No

☐ Yes

Debtor Coast to Coast Leasing, LLC
Name

Case number (if known) _____

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	<p>Nonpriority creditor's name and mailing address</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _ _ _ _ _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
3.2	<p>Nonpriority creditor's name and mailing address</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _ _ _ _ _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
3.3	<p>Nonpriority creditor's name and mailing address</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _ _ _ _ _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
3.4	<p>Nonpriority creditor's name and mailing address</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _ _ _ _ _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>

Debtor Coast to Coast Leasing, LLC Case number (if known) _____
Name

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

Total of claim amounts

5a. Total claims from Part 1 5a. \$0.00

5b. Total claims from Part 2 5b. + \$0.00

5c. Total of Parts 1 and 2 5c. \$0.00
Lines 5a + 5b = 5c.

Fill in this information to identify the case:

Debtor name Coast to Coast Leasing, LLC

United States Bankruptcy Court for the:

Northern District of Illinois

Case number (if known): _____ Chapter 11

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☒ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.

☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1 State what the contract or lease is for and the nature of the debtor's interest _____

State the term remaining _____

List the contract number of any government contract _____

2.2 State what the contract or lease is for and the nature of the debtor's interest _____

State the term remaining _____

List the contract number of any government contract _____

2.3 State what the contract or lease is for and the nature of the debtor's interest _____

State the term remaining _____

List the contract number of any government contract _____

2.4 State what the contract or lease is for and the nature of the debtor's interest _____

State the term remaining _____

List the contract number of any government contract _____

Fill in this information to identify the case:

Debtor name Coast to Coast Leasing, LLC

United States Bankruptcy Court for the: Northern District of Illinois
(State)

Case number (If known): _____

☐ Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

- ☒ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☐ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, **Schedules D-G**. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing address

Name

Check all schedules that apply:

2.1

Street

City

State

ZIP Code

- ☐ D
☐ E/F
☐ G

2.2

Street

City

State

ZIP Code

- ☐ D
☐ E/F
☐ G

2.3

Street

City

State

ZIP Code

- ☐ D
☐ E/F
☐ G

2.4

Street

City

State

ZIP Code

- ☐ D
☐ E/F
☐ G

Debtor Coast to Coast Leasing, LLC Case number (if known) _____
Name _____

Additional Page if Debtor Has More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor			Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:	
2.5	<div>Street</div> <div>CityStateZIP Code</div>	<div></div>	<input type="checkbox"/> D	<input type="checkbox"/> E/F
			<input type="checkbox"/> G	
2.6	<div>Street</div> <div>CityStateZIP Code</div>	<div></div>	<input type="checkbox"/> D	<input type="checkbox"/> E/F
			<input type="checkbox"/> G	

Fill in this information to identify the case:

Debtor name Coast to Coast Leasing, LLC

United States Bankruptcy Court for the:

Northern District of Illinois

Case number (if known): _____ Chapter 11

☐ Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)

1a. Real Property:

Copy line 88 from *Schedule A/B*.....

\$0.00

1b. Total personal property:

Copy line 91A from *Schedule A/B*.....

\$9,989,000.00

1c. Total of all property:

Copy line 92 from *Schedule A/B*.....

\$9,989,000.00

Part 2: Summary of Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*.....

\$19,167,713.12

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. Total claim amounts of priority unsecured claims:

Copy the total claims from Part 1 from line 5a of *Schedule E/F*.....

\$0.00

3b. Total amount of claims of non-priority amount of unsecured claims:

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*.....

+ \$0.00

4. Total liabilities.....

Lines 2 + 3a + 3b

\$19,167,713.12

Fill in this information to identify the case:

Debtor name Coast to Coast Leasing, LLC

United States Bankruptcy Court for the:

Northern District of Illinois

Case number (if known): _____

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy 04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue

Check all that apply

Gross revenue

(before deductions and exclusions)

From the beginning of the fiscal year to filing date:

From 01/01/2024 to Filing date
MM/ DD/ YYYY

☒ Operating a business

\$102,863.00

☐ Other _____

For prior year:

From 01/01/2023 to 12/31/2023
MM/ DD/ YYYY MM/ DD/ YYYY

☒ Operating a business

\$4,411,100.00

☐ Other _____

For the year before that:

From 01/01/2022 to 12/31/2022
MM/ DD/ YYYY MM/ DD/ YYYY

☒ Operating a business

\$2,355,641.00

☐ Other _____

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None

Description of sources of revenue

Gross revenue from each source

(before deductions and exclusions)

From the beginning of the fiscal year to filing date:

From 01/01/2024 to Filing date
MM/ DD/ YYYY

For prior year:

From 01/01/2023 to 12/31/2023
MM/ DD/ YYYY MM/ DD/ YYYY

For the year before that:

From 01/01/2022 to 12/31/2022
MM/ DD/ YYYY MM/ DD/ YYYY

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☒ None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer Check all that apply
3.1. _____ Creditor's name	_____	_____	<input type="checkbox"/> Secured debt
_____	_____		<input type="checkbox"/> Unsecured loan repayments
Street _____	_____		<input type="checkbox"/> Suppliers or vendors
_____	_____		<input type="checkbox"/> Services
_____			<input type="checkbox"/> Other _____
City _____ State _____ ZIP Code _____			

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or co-signed by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1. _____ Creditor's name	_____	_____	_____
_____	_____		_____
Street _____	_____		_____
_____	_____		
City _____ State _____ ZIP Code _____			
Relationship to debtor _____			

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Description of the property	Date	Value of property
-----------------------------	-----------------------------	------	-------------------

5.1.

Creditor's name

Street

CityStateZIP Code

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
6.1.			
Creditor's name	XXXX- _ _ _ _		
Street			
CityStateZIP Code			

Part 3: Legal Actions or Assignments

7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☒ None

Case title	Nature of case	Court or agency's name and address	Status of case
7.1.			<input type="checkbox"/> Pending
		Name	<input type="checkbox"/> On appeal
Case number		Street	<input type="checkbox"/> Concluded
		CityStateZIP Code	

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

8.1.

Custodian's name and address	Description of the property	Value
<div>Custodian's name</div> <div>Street</div> <div>CityStateZIP Code</div>	<div>Case title</div> <div>Case number</div> <div>Date of order or assignment</div>	<div>Court name and address</div> <div>Name</div> <div>Street</div> <div>CityStateZIP Code</div>

Part 4: Certain Gifts and Charitable Contributions

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

☒ None

9.1.

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
<div>Recipient's name</div> <div>Street</div> <div>CityStateZIP Code</div> <div>Recipient's relationship to debtor</div>			

Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

☒ None

10.1.

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Date of loss	Value of property lost
	<div>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.</div> <div>List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).</div>		

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None

11.1.

Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
Law Offices of David P. Leibowitz, LLC	Attorney's Fee	1/27/2023	\$30,000.00
Address			
3478 N Broadway St Unit 234			
Street			
Chicago, IL 60657-6968			
CityStateZIP Code			
Email or website address			
dleibowitz@lakelaw.com			
Who made the payment, if not debtor?			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None

12.1.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
Trustee			

13. Transfers not already listed on this statement

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None

13.1.

Who received the transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
<div>Address</div> <div>Street</div> <div>CityStateZIP Code</div> <div>Relationship to debtor</div>			

Part 7: Previous Locations

14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address	Dates of occupancy
14.1. <div>Street</div>	From To

Part 8: Health Care Bankruptcies

15. Health Care bankruptcies

Is the debtor primarily engaged in offering services and facilities for:
—diagnosing or treating injury, deformity, or disease, or
—providing any surgical, psychiatric, drug treatment, or obstetric care?

☒ No. Go to Part 9.

☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
15.1. <div>Facility name</div> <div>Street</div> <div>CityStateZIP Code</div>	<div>Location where patient records are maintained(if different from facility address). If electronic, identify any service provider.</div>	<div>How are records kept?</div> <div>Check all that apply:</div> <div><input type="checkbox"/> Electronically</div> <div><input type="checkbox"/> Paper</div>

Part 9: Personally Identifiable Information

16. Does the debtor collect and retain personally identifiable information of customers?

- ☒ No.
- ☐ Yes. State the nature of the information collected and retained. _____
Does the debtor have a privacy policy about that information?
☐ No
☐ Yes

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b) or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☒ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?
☐ No. Go to Part 10.
☐ Yes. Fill in below:

Name of plan	Employer identification number of the plan
_____	EIN: _ _ - _ _ _ _ _
Has the plan been terminated?	
<input type="checkbox"/> No	
<input type="checkbox"/> Yes	

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units

18. Closed financial accounts

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None

Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1 _____ Name _____ Street _____ City State ZIP Code	XXXX- _ _ _ _	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	_____

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.
☒ None

19.1

Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
<div>Name</div> <div>Street</div> <div>CityStateZIP Code</div>	<div></div> <div></div> <div>Address</div> <div></div>	<div></div> <div></div> <div></div>	<div><input type="checkbox"/> No</div> <div><input type="checkbox"/> Yes</div>

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

20.1

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
<div>Name</div> <div>Street</div> <div>CityStateZIP Code</div>	<div></div> <div></div> <div>Address</div> <div></div>	<div></div> <div></div> <div></div>	<div><input type="checkbox"/> No</div> <div><input type="checkbox"/> Yes</div>

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Owner's name and address	Location of the property	Description of the property	Value
<div>Name</div> <div>Street</div> <div>CityStateZIP Code</div>	<div></div> <div></div>	<div></div> <div></div>	<div></div>

Part 12: Details About Environmental Information

For the purpose of Part 12, the following definitions apply:

- Environmental law** means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- Site** means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- Hazardous material** means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No
- ☐ Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
	Name		<input type="checkbox"/> Pending
Case number	Street		<input type="checkbox"/> On appeal
			<input type="checkbox"/> Concluded
	City State ZIP Code		

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No
- ☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name	Name		
Street	Street		
City State ZIP Code	City State ZIP Code		

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No
- ☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name	Name		
Street	Street		
City State ZIP Code	City State ZIP Code		

Part 13: Details About the Debtor’s Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

Business name and address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.1. _____ Name _____ Street _____ City State ZIP Code		EIN: ____-_____ Dates business existed From _____ To _____

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address	Dates of service
26a.1. Kostov and Associates, PC Name 444 N Northwest Hwy Ste 200 Street Park Ridge, IL 60068-3271 City State ZIP Code	From _____ To _____

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None

Name and address	Dates of service
26b.1. _____ Name _____ Street _____ City State ZIP Code	From _____ To _____

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☒ None

Name and address	If any books of account and records are unavailable, explain why
26c.1. _____ Name _____ Street _____ City State ZIP Code	_____ _____ _____

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None

Name and address

26d.1.

Name

Street

City State ZIP Code

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

- ☒ No
- ☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
Name and address of the person who has possession of inventory records		

27.1.

Name

Street

City State ZIP Code

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Hristov Angelov	566 Rock Road Dr Ste 3 East Dundee, IL 60118-2447	Member, Membership Interest	33.33%
Peter Trendafilov	566 Rock Road Dr. Unit 3 Dundee, IL 60118	Member, Member	33.33%
Peter Penteleyemenov	566 Rock Road Dr Ste 3 East Dundee, IL 60118-2447	Memher, Membership Interest	33.33%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☒ No
- ☐ Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
			From To

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☒ No
- ☐ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
-------------------------------	--	-------	--------------------------------

30.1.

Name

Street

CityStateZIP Code

Relationship to debtor

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

☒ No

☐ Yes. Identify below.

Name of the parent corporationEmployer Identification number of the parent corporation

EIN: - - - - -

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

☒ No

☐ Yes. Identify below.

Name of the pension fundEmployer Identification number of the pension fund

EIN: - - - - -

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 03/01/2024
MM/ DD/ YYYY

X /s/ Hristo Angelov

Signature of individual signing on behalf of the debtor

Printed name Hristo Angelov

Position or relationship to debtor Member

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☒ No

☐ Yes

Fill in this information to identify the case:

Debtor name Coast to Coast Leasing, LLC

United States Bankruptcy Court for the:

Northern District of Illinois

Case number (if known): _____

☐ Check if this is an amended filing

Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an *insider*, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

	Name of creditor and complete mailing address, including zip code	Name, telephone number, and email address of creditor contact	Nature of the claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of unsecured claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
					Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
1	Amur Equipment Finance, Inc PO Box 202136 Florence, SC 29502				\$321,049.00	\$195,000.00	\$126,049.00
2	BMO PO Box 3040 Cedar Rapids, IA 52406				\$830,000.00	\$650,000.00	\$180,000.00
3	Crossroads Equipment Lease & Finance 9385 Haven Ave., Rancho Cucamonga, CA 91730				\$363,035.26	\$208,000.00	\$155,035.26
4	DLL PO Box 41602 Philadelphia, PA 19130				\$1,030,434.65	\$650,000.00	\$380,434.65
5	First Federal Savings Bank 633 LaSalle St Ottawa, IL 61350				\$657,111.67	\$239,000.00	\$418,111.67
6	First Federal Savings Bank 633 LaSalle St Ottawa, IL 61350				\$508,806.80	\$167,000.00	\$341,806.80
7	First Federal Savings Bank 633 LaSalle St Ottawa, IL 61350				\$276,578.65	\$149,000.00	\$127,578.65
8	Jules and Associates, Inc Suite 1900 515 South Figueroa Street Los Angeles, CA 90071				\$655,000.00	\$264,000.00	\$391,000.00

Debtor Coast to Coast Leasing, LLC

Case number (if known) _____

Name

	Name of creditor and complete mailing address, including zip code	Name, telephone number, and email address of creditor contact	Nature of the claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of unsecured claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
					Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
9	KLC Financial, LLC PO.Box 2149 Gig Harbor, WA 98335				\$383,065.15	\$260,000.00	\$123,065.15
10	People's United Equipment Finance Corp Suite 175 4225 Naperville Rd Lisle, IL 60532				\$674,082.85	\$520,000.00	\$154,082.85
11	PNC Equipment Finance Suite 250 655 Business Center Dr Horsham, PA 19044				\$766,128.30	\$455,000.00	\$311,128.30
12	Siemens Financial Services, Inc Suite 200 200 Wood Avenue South Iselin, NJ 08830				\$1,302,912.88	\$300,000.00	\$1,002,912.88
13	SUMITOMO MITSUI FINANCE AND LEASING CO Floor 8th 666 THIRD AVE New York, NY 10017				\$844,218.36	\$534,000.00	\$310,218.36
14	Triumph Commercial Finance suite 1700 12700 Parl Central Drive Dallas, TX 75251				\$2,877,765.79	\$1,716,000.00	\$1,161,765.79
15	Triumph Commercial Finance 1700 12700 Parl Central Drive Dallas, TX 75251				\$979,903.72	\$240,000.00	\$739,903.72
16	Triumph Commercial Finance suite 1700 12700 Parl Central Drive Dallas, TX 75251				\$979,597.59	\$323,000.00	\$656,597.59
17	Triumph Commercial Finance 1700 12700 Parl Central Drive Dallas, TX 75251				\$1,119,174.13	\$477,000.00	\$642,174.13
18	Triumph Commercial Finance suite 1700 12700 Parl Central Drive Dallas, TX 75251				\$1,119,948.12	\$503,000.00	\$616,948.12
19	Triumph Commercial Finance suite 1700 12700 Parl Central Drive Dallas, TX 75251				\$945,805.67	\$418,000.00	\$527,805.67
20	Triumph Commercial Finance suite 1700 12700 Parl Central Drive Dallas, TX 75251				\$947,184.17	\$424,000.00	\$523,184.17

B2030 (Form 2030) (12/15)

United States Bankruptcy Court
Northern District of Illinois

In re Coast to Coast Leasing, LLC

Case No. _____

Debtor

Chapter 11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

☒ **FLAT FEE**

For legal services, I have agreed to accept \$0.00

Prior to the filing of this statement I have received \$30,000.00

Balance Due (\$30,000.00)

☐ **RETAINER**

For legal services, I have agreed to accept and received a retainer of

The undersigned shall bill against the retainer at an hourly rate of

[Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay all Court approved fees and expenses exceeding the amount of the retainer.

2. \$1,738.00 of the filing fee has been paid.

3. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify)

4. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

5. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;

B2030 (Form 2030) (12/15)

- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
7. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION	
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.	
<u>03/01/2024</u>	<u>/s/ David P Leibowitz</u>
<i>Date</i>	David P Leibowitz <i>Signature of Attorney</i>
	Bar Number: 1612271 Law Offices of David P. Leibowitz, LLC 3478 N Broadway St Unit 234 Chicago, IL 60657-6968 Phone: (312) 662-5750
	<u>Law Offices of David P. Leibowitz, LLC</u> <i>Name of law firm</i>



Law Offices of David P. Leibowitz LLC
3478 N. Broadway – Unit 234
Chicago, Illinois 60657-6968
312-662-5750
www.lakelaw.com

January 28, 2024

Coast to Coast Leasing, LLC
566 Rock Road Drive
Suite 2
East Dundee ,Il 60118-2447

Attention: Mr. Hristo Angelov
Manager

RE: Chapter 11 Representation

Dear Mr. Angelov:

Thank you for engaging Lakelaw to assist you in representing your interests in your Chapter 11 case. We have consulted with you concerning your company's financial condition as well as your options. We have considered the options available to you, both in and outside of the context of bankruptcy reorganization. After full consultation, you have asked Lakelaw to prepare this engagement letter for your consideration. By engaging Lakelaw to represent you in connection with your individual Chapter 11 case, I will be available to meet with you to assist in planning and preparing for your filing.

Terms of Legal Representation

The general terms of our legal representation are as follows. You have agreed to engage our firm on an hourly basis to assist you in reorganizing your financial affairs through filing a chapter 11 case with the

Bankruptcy Court for the Northern District of Illinois. The filing fee for a chapter 11 case is \$1,738.00.

We also will require the payment of a pre-petition retainer in the amount of \$30,000 at the time you enter into this engagement agreement. Our hourly billing rates applicable to your case are as follows:

David P. Leibowitz	\$800/hour
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Linda A. Green	\$550/hour
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In addition, our paralegals bill at rates of \$150/hour. We reserve the right to adjust the billing rates annually at the first of January. In addition to hourly billing, you will be responsible for the costs and expenses that we incur in connection with your case to the extent the Bankruptcy Court allows them.

Fees will continue to accrue after the filing of your chapter 11 bankruptcy case. We will apply to the Bankruptcy Court for approval of the fees you incur on an interim basis, no less than once every four months. Such fees will have to be paid within 30 days of the date they are allowed.

In the event, for some unforeseen reason, you do not pay fees when due, we shall have the right to withdraw from representing you.

You understand, as is the case with any law firm, we may from time to time represent, in an unrelated matter, a client whose interests may conflict with those of another client. Thus, for example, there may be instances in which we may represent you in a litigation or other matter and, at the same time, we may represent another party adverse to you in connection with an unrelated litigation or other matter. As part of our engagement, you consent to such representations so long as they do not involve a direct conflict in a specific matter in which we represent you.

By executing this agreement, you acknowledge that you are aware that uncertainty exists concerning the outcome of this matter and that the firm has made no guarantees as to the disposition of any phase of this matter. All representations and expressions relative to the outcome of this matter are only expressions of our opinion and do not constitute guarantees. To this end, there are a variety of issues that you may have

to confront in the early stages of your case given the specific facts of your case. More than likely, at least some of your creditors will contest your effort to file chapter 11 and reorganize your financial affairs. This will include seeking adequate protection payments, negotiating cash collateral, seeking relief from the automatic stay, seeking appointment of a chapter 11 trustee or seeking dismissal of your chapter 11 bankruptcy case. We cannot enumerate or list the multiple different ways in which your creditors may attempt to contest your filing. We also cannot guarantee success in any instance.

After you have had an opportunity to review this engagement letter, please do not hesitate to call me with any questions or comments you may have. Below is an overview of the advantages and disadvantages to filing a chapter 11 bankruptcy case. Please review these topics, and the attached U.S. Trustee Operating Instructions carefully. Post-filing, you will be required to follow the U.S. Trustee's Operating Instructions throughout the pendency of your chapter 11 case.

Your role as a Debtor in Possession

In Chapter 11, a trustee is not appointed unless there is serious fraud or misconduct by the Debtor prior to the petition. The Debtor becomes the Debtor in Possession in chapter 11. However, as Debtor in Possession, you must not consider only your own interests. As Debtor in Possession ("DIP"), you will have to act not only in your own best interests, but, rather, first and foremost, in the interests of all the creditors in your case. That means that you must try to maximize the amount available to creditors. The point of Chapter 11 is that creditors are happy to get more in a reorganization than they would get in a liquidation.

In Chapter 11, as in Chapter 7, you must file a petition, Schedules of Assets and Liabilities, and a Statement of Financial Affairs. You must also file a list of all your creditors, so they will have notice of your case and will have an opportunity to participate. While we can file the petition alone, we must file the Schedules and Statement of Financial Affairs within 14 days of the petition unless the court grants us additional time.

Once the petition is filed, a representative of the US Trustee's office will conduct an informal information meeting. It is important to start off on a good foot for this meeting. So, we will prepare in advance. Next, there is the First Meeting of Creditors. A representative of the Office of the United States Trustee (UST) conducts the First Meeting of Creditors. The UST is a branch of the United States Department of Justice. The UST monitors all bankruptcy cases, including Chapter 11 cases. It has the right to appear and to express its point of view in any court proceeding. Some judges are very deferential to the views of the UST, some are not. A creditors' committee may be organized at a First Meeting of Creditors. For this reason, it is wise to connect with your important creditors before you file.

The UST has issued strict regulations for the conduct of a Chapter 11 case. These include, among others:

- Maintenance of all funds in a DIP account separate from any pre-petition bank accounts you may have maintained. When the funds in your DIP account exceed \$250,000, you must notify the Office of the UST to arrange for the Bank to collateralize its account with government securities. See Operating Instructions for Chapter 11 attached to this letter.
- Filing monthly reports with the UST setting forth all income and expenses
- Payment of a quarterly fee with the UST in accordance with a schedule based on your income and expenditures in the prior quarter.
- Maintenance of all necessary insurance and tax payments.

The UST has issued standard operating requirements for a DIP in chapter 11 cases to assist you in performing your functions. I have attached these requirements as an Exhibit to this letter. One very important concept is that *you may not pay any pre-petition*

obligation after commencement of a Chapter 11 case without court approval.

Please note that in Chapter 11, cash flow after the commencement of the case is now property of the estate. Accordingly, you will have to deposit these earnings in a separate "Debtor in Possession" Account. Furthermore, unless court approval is obtained, you may not pay any prepetition claims against the estate. You may not expend funds out of the ordinary course of business either.

In Chapter 11, creditors are classified in accordance with their priority. Secured creditors have higher priority than unsecured creditors. Under some circumstances, creditors may also be subordinated, in other words, treated as junior creditors. A creditor who has a partly secured claim is treated as both a secured and unsecured creditor.

Sales out of the Ordinary Course of Business

Under the Bankruptcy Code, it is possible to sell some or all the assets of a debtor out of the ordinary course of business. It would have to be shown that such a sale was necessary immediately owing to the rapid decline in the value of the property to be sold. It would have to be shown that such a sale was not a "de facto" or "sub rosa" plan of reorganization. We have discussed this with you in some detail already.

The Automatic Stay

Once you file your bankruptcy case, any action to collect any debt must stop at once. While a creditor may seek relief from the automatic stay to continue to collect his debt, the Bankruptcy Court will not allow him to do so if he is "adequately protected." In lay terms, this means that his position is not getting any worse because of the delay. As a practical matter, all litigation would stop. However, you would have to be prepared for motions for relief from the automatic stay by the various secured creditors. They would assert that you have no equity in your real estate and that the real estate is not necessary for reorganization. The creditors could establish this by proving that you did not have a confirmable plan of reorganization in immediate prospect in order to

establish that the real estate was not necessary for a successful reorganization.

Initial Stages

At the beginning of the case several “first day” matters are addressed. These include:

- Retention of professionals
- Obtaining an order authorizing the use of “cash collateral” meaning your accounts receivable
- Obtaining an order providing for “adequate protection” of secured creditors – meaning payment of a sum of money that leaves them no worse as the case goes along than they were at the beginning of the case
- Obtaining an order allowing you to use your existing bank accounts and processes rather than opening up new “Debtor in Possession” bank accounts.
- There may be other things that are needed immediately. We will address these with you in due course.

The Investigative Process

Creditors are entitled to ask questions concerning your assets. The way they do this is by discovery and depositions under Bankruptcy Rule 2004. This is the same as a citation to discover assets in the State Court. So, it is important that you be fully conversant with all your properties. Even if you do not know the exact facts and figures, you cannot allow yourself to appear evasive or unable to explain what you have and how you disposed of assets you previously owned.

The Plan Process

The Court will establish a deadline within which we are to file a plan. As we discussed, it will be in your best interest to consult with your large creditors to gain their cooperation and support before we file. Once the plan is filed, we will solicit acceptances of the plans from the various classes of creditors. In order to confirm a plan, it is necessary to gain the support of a majority in number and 2/3 in amount of impaired classes of creditors. Impaired classes of creditors are classes for which you propose treatment other than what they are entitled to contract or law. You can confirm a plan over the objection of a dissenting class of creditors, but this requires a contested confirmation hearing. This can be complex, and I do not propose addressing that process in this letter.

Plan Confirmation

There are many requirements for confirmation of a plan and confirmation of a plan is not necessarily guaranteed. We will go over all the standards and obligations to confirm a plan with you in person. If your plan is confirmed, creditors will not be allowed to take any action against you other than for the amounts of money reserved to them under the plan. And upon confirmation of the plan, and completion of payments thereunder, you will be discharged from all debts except for your plan obligations. Plan Confirmation is too complex to discuss in this letter. I will be pleased to discuss all aspects of Plan Confirmation with you as we proceed in your case.

Bankruptcy Court Jurisdiction

The Bankruptcy Court has the right, but not the obligation, to handle most matters which "relate to" and "arise from" your Chapter 11 case, as well concerning the actual bankruptcy case itself.

The Bankruptcy Court also has the jurisdiction to hear any complaint that a creditor may file against you to object to the dischargeability of his debt. Just as in Chapter 7, creditors would have to object to dischargeability within 60 days after your first meeting of creditors to render you liable on your judgment to him, even after your Chapter 11 discharge. This time could be extended for cause on motion to the Court.

Cooperation

Naturally, you will provide us with all information needed to assist you in this engagement. Initially, this shall include information for the broker you have identified and a listing of your utilities. We will cooperate with each other and meet as necessary to prepare and conclude your Plan. Ms. Mo, we know that contemplating and planning to file bankruptcy can be a difficult time for you. I will give you my personal attention and treat your affairs with the utmost discretion.

Advance Payment Retainer Agreement

You understand that Lakelaw is unwilling to represent you without receiving an advance payment retainer. You agree that the \$30,000.00 retainer that we require you to provide to us prior to filing your individual chapter 11 case will be treated as an “advance payment retainer” and that this retainer will immediately be placed in our general account.

In addition, there is a filing fee for Chapter 11 in the amount of \$1,738. You will provide a separate check in that amount and I will deposit that in my clients’ funds account until such time as the case is filed.

U.S. Trustee Operating Instructions and Reporting Requirements (OIRR) and Other Requirements

As referenced above, attached to this engagement letter is a copy of the United States Trustee’s Operating Instruction and Reporting Requirements (collectively, “OIRR Guidelines”). These OIRR Guidelines are significant. Please review them carefully and ask any questions that you may have. As a chapter 11 debtor, you will be obligated to comply with these OIRR Guidelines.

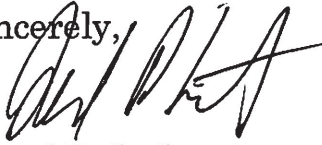
You must provide all information requested in these Guidelines. You must file Monthly Operating Reports in the form provided. You must pay quarterly fees based on your company’s disbursements. You must abide by all US Trustee Rules and Regulations.

Conclusion

Again, we are pleased that you have selected to engage Lakelaw to represent you in connection with your individual chapter 11 bankruptcy

case. If you have any questions regarding the foregoing, please do not hesitate to contact me. In closing, please sign a copy of this letter to signify your agreement with its terms. Lakelaw does not have an engagement or obligation to you unless and until you: (a) tender the \$30,000.00 retainer, as per the instructions and agreements related thereto discussed above; (b) delivering a signed final engagement letter and (c) delivering receipt of the US Trustee OIRR memorandum.

Sincerely,



David P. Leibowitz

AGREED TO AND ACCEPTED:

Coast to Coast Leasing, LLC

By:  _____

Hristo Angelov
Manager

IN THE UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION (CHICAGO)

IN RE: **Coast to Coast Leasing, LLC**

CASE NO

CHAPTER 11

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 03/01/2024 Signature /s/ Hristo Angelov
Hristo Angelov, Member

Amur Equipment Finance, Inc

PO Box 202136
Florence, SC 29502

BMO

PO Box 3040
Cedar Rapids, IA 52406

**Crossroads Equipment Lease
& Finance**

9385 Haven Ave.,
Rancho Cucamonga, CA 91730

DLL

PO Box 41602
Philadelphia, PA 19130

First Federal Savings Bank

633 LaSalle St
Ottawa, IL 61350

Jules and Associates, Inc

Suite 1900
515 South Figueroa Street
Los Angeles, CA 90071

KLC Financial, LLC

PO.Box 2149
Gig Harbor, WA 98335

**People's United Equipment
Finance Corp**

Suite 175
4225 Naperville Rd
Lisle, IL 60532

PNC Equipment Finance

Suite 250
655 Business Center Dr
Horsham, PA 19044

**Siemens Financial Services,
Inc**

Suite 200
200 Wood Avenue South
Iselin, NJ 08830

**SUMITOMO MITSUI FINANCE
AND LEASING CO**

Floor 8th
666 THIRD AVE
New York, NY 10017

Triumph Commercial Finance

suite 1700
12700 Parl Central Drive
Dallas, TX 75251

Triumph Commercial Finance

1700
12700 Parl Central Drive
Dallas, TX 75251

Triumph Commercial Finance

Suite 1700
12700 Parl Central Drive
Dallas, TX 75251

Fill in this information to identify the case:

Debtor name Coast to Coast Leasing, LLC

United States Bankruptcy Court for the:

Northern District of Illinois

Case number (if known): _____

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING – Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☐ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☐ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☐ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☐ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☐ *Schedule H: Codebtors* (Official Form 206H)
- ☐ *A Summary of Assets and Liabilities for Non-Individuals* (Official Form 206A-Summary)
- ☐ *Amended Schedule* _____
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 03/01/2024
MM/ DD/ YYYY

X /s/ Hristo Angelov
Signature of individual signing on behalf of debtor

Hristo Angelov
Printed name

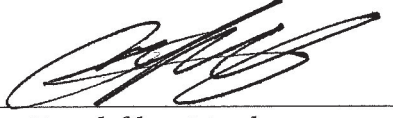
Member
Position or relationship to debtor

RESOLUTION BY UNANIMOUS CONSENT OF MEMBERS

COAST TO COAST LEASING, LLC

The undersigned, being all of the members of Coast to Coast Leasing, LLC, an Illinois Limited Liability Company, resolve that the company file a petition for relief under chapter 11 of the United States Bankruptcy Code and that its member, Hristo Angelov be empowered to sign all documents to effect the foregoing.



Hristo Angelov, Member

Peter Trendafilov, Member

Peter Penteleymenov, Member

Dated March 1, 2024
At: East Dundee, Illinois

COAST TO COAST LEASING, LLC

Balance Sheet

As of December 31, 2023

		TOTAL
ASSETS		
Current Assets		
Bank Accounts		
Fifth Third Bank Business Checking		392.84
Total Bank Accounts		\$392.84
Other Current Assets		
Due from Five Star Garage		659,173.57
Due from Nationwide Cargo		102,461.05
New equipment deposit		0.00
Total Other Current Assets		\$761,634.62
Total Current Assets		\$762,027.46
Fixed Assets		
Accumulated depreciation		-4,924,161.28
Tools, machinery, and equipment		59,520.00
Trailers		
Reefer 036825		85,557.00
Reefer 036826		85,557.00
Reefer 036836		85,557.00
Reefer 036838		85,557.00
Reefer 036840		85,557.00
Reefer 036844		85,557.00
Reefer 036846		85,557.00
Reefer 041523		85,500.00
Reefer 041524		85,500.00
Reefer 041525		85,500.00
Reefer 041526		85,500.00
Reefer 041527		85,500.00
Reefer 041528		85,500.00
Reefer 041529		85,500.00
Reefer 041530		85,500.00
Reefer 041531		85,500.00
Reefer 041532		85,500.00
Reefer 069207		109,149.00
Reefer 069208		109,149.00
Reefer 069209		109,149.00
Reefer 102801		78,060.00
Reefer 124601		110,136.50
Reefer 124602		110,136.50
Reefer 124603		110,136.50
Reefer 124604		110,136.50
Reefer 124605		110,136.50
Reefer 124606		110,136.50
Reefer 124607		110,136.50
Reefer 124608		110,136.50

COAST TO COAST LEASING, LLC

Balance Sheet

As of December 31, 2023

	TOTAL
Reefer 124609	110,136.50
Reefer 124610	110,136.50
Reefer 456316	0.00
Reefer 456317	0.00
Reefer 456318	0.00
Reefer 456319	0.00
Reefer 456320	0.00
Reefer 456321	0.00
Reefer 456322	0.00
Reefer 456323	0.00
Reefer 456324	0.00
Reefer 456325	0.00
Reefer 513201	0.00
Reefer 513202	0.00
Reefer 513203	0.00
Reefer 513204	0.00
Reefer 513205	0.00
Reefer 513206	0.00
Reefer 513207	0.00
Reefer 513208	0.00
Reefer 513209	0.00
Reefer 513210	0.00
Reefer 513211	0.00
Reefer 513212	0.00
Reefer 513213	0.00
Reefer 513214	0.00
Reefer 513215	0.00
Reefer 513216	0.00
Reefer 513217	0.00
Reefer 513218	0.00
Reefer 513219	0.00
Reefer 513220	0.00
Reefer 513221	0.00
Reefer 513222	0.00
Reefer 513223	0.00
Reefer 513224	0.00
Reefer 513225	0.00
Reefer 553011	78,057.00
Reefer 553017	72,820.00
Reefer 558201	72,820.00
Reefer 662823	93,026.82
Reefer 662828	93,026.82
Reefer 662924	93,026.82
Reefer 662925	93,026.76
Reefer 662926	93,026.82

COAST TO COAST LEASING, LLC

Balance Sheet

As of December 31, 2023

	TOTAL
Reefer 662927	93,026.82
Reefer 662929	93,026.82
Reefer 662930	93,026.82
Reefer 767474	104,657.00
Reefer 767475	104,657.00
Reefer 783501	98,347.00
Reefer 783502	98,347.00
Reefer 783503	98,347.00
Reefer 783504	98,347.00
Reefer 783505	98,347.00
Reefer 783506	98,347.00
Reefer 783507	98,347.00
Reefer 783508	98,347.00
Reefer 783509	98,347.00
Reefer 783510	98,347.00
Reefer 793903	93,026.82
Reefer 793909	93,026.82
Reefer 793917	93,026.82
Reefer 793919	93,026.82
Reefer 793923	93,026.82
Reefer 793929	93,026.82
Reefer 793934	93,026.82
Reefer 793937	93,026.82
Reefer 793940	93,026.82
Reefer 798811	93,026.82
Reefer 798815	93,026.82
Reefer 798824	93,026.82
Reefer 798834	93,026.82
Reefer 799002	93,026.82
Reefer 799012	93,026.82
Reefer 799013	93,026.82
Reefer 799015	93,026.82
Reefer 799017	93,026.82
Reefer 799018	93,026.82
Reefer 799028	93,026.82
Reefer 799212	93,026.82
Reefer 799215	93,026.82
Reefer 799301	93,026.82
Reefer 799302	93,026.82
Reefer 799311	93,026.82
Reefer 816201	100,660.00
Reefer 816202	100,660.00
Reefer 816203	100,660.00
Reefer 816204	100,660.00
Reefer 816205	100,660.00

COAST TO COAST LEASING, LLC

Balance Sheet

As of December 31, 2023

	TOTAL
Reefer 820501	0.00
Reefer 820502	0.00
Reefer 820503	0.00
Reefer 820504	0.00
Reefer 820505	0.00
Reefer 820506	0.00
Reefer 820507	0.00
Reefer 820508	0.00
Reefer 820509	63,707.61
Reefer 820510	63,707.61
Reefer 820511	63,707.61
Reefer 820512	63,707.61
Reefer 820513	63,707.61
Reefer 820514	63,707.61
Reefer 820515	63,707.61
Reefer 820516	63,707.61
Reefer 820517	63,707.61
Reefer 820518	63,707.61
Reefer 820519	63,707.61
Reefer 820520	63,707.61
Reefer 820521	63,707.61
Reefer 820522	63,707.61
Reefer 820523	63,707.61
Reefer 820524	63,707.61
Reefer 820525	63,707.61
Reefer 877121	103,622.00
Reefer 877122	103,622.00
Reefer 877123	103,622.00
Reefer 941016	109,149.50
Reefer 941017	109,149.50
Reefer 941018	109,149.50
Reefer 941019	103,622.00
Reefer 941020	109,149.50
Reefer 976320	45,782.99
Reefer 976326	45,782.99
Reefer 976327	45,782.99
Reefer 976329	45,782.97
Van 158889	0.00
Van 158890	0.00
Van 158891	0.00
Van 158892	0.00
Van 158897	0.00
Van 158898	0.00
Van 158899	0.00
Van 158900	0.00

COAST TO COAST LEASING, LLC

Balance Sheet

As of December 31, 2023

	TOTAL
Van 158901	0.00
Van 158903	0.00
Van 896201	0.00
Van 896202	0.00
Van 896204	0.00
Van 896205	0.00
Van 896206	0.00
Van 896207	0.00
Van 896208	0.00
Van 896209	0.00
Van 896210	0.00
Van 896211	0.00
Van 896213	0.00
Van 896214	0.00
Total Trailers	10,067,684.31
Trucks	
Freightliner LR1377	120,000.00
Freightliner HT2172	44,210.04
Freightliner HT2190	44,210.04
Freightliner HT2201	44,210.04
Freightliner HT2222	44,210.04
Freightliner HT2225	44,210.04
Freightliner HT2297	44,210.04
Freightliner HT2299	44,210.04
Freightliner HT2344	44,210.04
Freightliner HT2401	44,210.04
Freightliner JC6955	78,859.00
Freightliner JC7000	78,859.00
Freightliner JC7141	78,859.00
Freightliner JP4930	100,000.00
Freightliner JR0414	100,000.00
Freightliner JY4763	100,885.00
Freightliner JZ1775	100,000.00
Freightliner JZ1780	100,000.00
Freightliner JZ1781	100,000.00
Freightliner JZ1787	100,000.00
Freightliner JZ1788	100,000.00
Freightliner JZ1790	100,000.00
Freightliner KA9350	101,521.25
Freightliner KB5669	54,449.87
Freightliner KB5722	54,449.87
Freightliner KB5766	54,449.90
Freightliner KB6129	110,521.25
Freightliner KB6137	107,206.00

COAST TO COAST LEASING, LLC

Balance Sheet

As of December 31, 2023

	TOTAL
Freightliner KC9388	120,000.00
Freightliner KE3809	59,399.00
Freightliner KE3944	59,399.00
Freightliner KE4014	59,399.00
Freightliner KE4089	59,399.00
Freightliner KE4285	59,399.00
Freightliner KE4457	59,399.00
Freightliner KE4465	59,399.00
Freightliner KE4469	59,399.00
Freightliner KE4470	59,399.00
Freightliner KG9584	116,521.25
Freightliner KH0148	116,521.25
Freightliner KH7883	90,695.00
Freightliner KH7884	90,695.00
Freightliner KJ2255	120,000.00
Freightliner KL3636	59,399.00
Freightliner KV8251	84,973.75
Freightliner LI2695	145,000.00
Freightliner LL1252	66,459.00
Freightliner LN1115	84,959.00
Freightliner LN1119	84,959.00
Freightliner LN1257	84,959.00
Freightliner LN1259	84,959.00
Freightliner LN1280	84,959.00
Freightliner LN1292	84,959.00
Freightliner LN1352	84,973.75
Freightliner LN1429	84,959.00
Freightliner LN1432	84,959.00
Freightliner LN1445	84,973.75
Freightliner LN1447	84,959.00
Freightliner LN1456	84,959.00
Freightliner LN1464	84,973.75
Freightliner LN1468	84,973.75
Freightliner LN1475	84,973.75
Freightliner LN1490	84,959.00
Freightliner LN1503	84,959.00
Freightliner LN1510	84,973.75
Freightliner LN1531	84,959.00
Freightliner LN1551	84,959.00
Freightliner LN1566	84,959.00
Freightliner LN1569	84,959.00
Freightliner LN1576	84,959.00
Freightliner LN1577	84,959.00
Freightliner LN1635	84,973.75
Freightliner LN1638	84,959.00

COAST TO COAST LEASING, LLC

Balance Sheet

As of December 31, 2023

	TOTAL
Freightliner LN1639	84,973.75
Freightliner LN1653	84,973.75
Freightliner LN1722	84,959.00
Freightliner LN1726	84,973.75
Freightliner LN1727	84,973.75
Freightliner LN1738	84,959.00
Freightliner LN1770	84,959.00
Freightliner LN1795	84,973.75
Freightliner LN1798	84,959.00
Freightliner LN1851	84,973.75
Freightliner LN1853	84,959.00
Freightliner LN1869	84,959.00
Freightliner LN1897	84,959.00
Freightliner LN1925	84,973.75
Freightliner LN1957	84,959.00
Freightliner LN1958	84,959.00
Freightliner LN1973	84,973.75
Freightliner LN1977	84,973.75
Freightliner LN2019	84,973.75
Freightliner LN2065	84,973.75
Freightliner LN2111	84,973.75
Freightliner LN2206	84,973.75
Freightliner LN2239	84,973.75
Freightliner LN2266	84,959.00
Freightliner LS4675	84,959.00
Freightliner LS4691	84,973.75
Freightliner LS4721	84,973.75
Freightliner LT3018	145,000.00
Freightliner MG6715	66,459.00
Freightliner MG6754	66,459.00
Freightliner MG6762	66,459.00
Freightliner MG6764	66,459.00
Freightliner MH8670	96,045.00
Freightliner MH8746	96,045.00
Freightliner MH8756	96,045.00
Freightliner MH8787	96,045.00
Freightliner MH8789	96,045.00
Freightliner MH8807	96,045.00
Freightliner MH8813	96,045.00
Freightliner MH8814	96,045.00
Freightliner MH8823	96,045.00
Freightliner MH8948	96,045.00
Freightliner MH8955	96,050.00
KW 299361	133,073.75
KW 299362	133,073.75

COAST TO COAST LEASING, LLC

Balance Sheet

As of December 31, 2023

	TOTAL
KW 299363	133,073.75
KW 299364	133,073.75
KW 299366	133,073.75
KW 299367	133,073.75
KW 299368	133,073.75
KW 299369	133,073.75
KW 299370	133,073.75
KW 299371	133,073.75
KW 299373	133,073.75
KW 299375	133,073.75
Volvo 195262	109,438.00
Volvo 196254	109,438.00
Volvo 196262	109,438.00
Volvo 196263	109,438.00
Volvo 196264	109,438.00
Volvo 196273	109,438.00
Volvo 207755	109,438.00
Volvo 207760	120,000.00
Total Trucks	12,136,259.00
Total Fixed Assets	\$17,339,302.03
TOTAL ASSETS	\$18,101,329.49
LIABILITIES AND EQUITY	
Liabilities	
Current Liabilities	
Other Current Liabilities	
Due to Five Star Garage	0.00
Total Other Current Liabilities	\$0.00
Total Current Liabilities	\$0.00
Long-Term Liabilities	
Notes Payable	
Amur #1160035	327,447.00
BMO #9372666001	839,286.39
Crossroads Equipm. Lease & Finance #101622	194,358.55
Crossroads Equipm. Lease & Finance #101623	194,358.55
Crossroads Equipm. Lease & Finance #101624	369,031.93
Crossroads Equipm. Lease & Finance #102152	238,217.91
Crossroads Equipm. Lease & Finance #102153	238,217.91
Crossroads Equipm. Lease & Finance #103968	275,390.07
DLL Financial Solutions Partner #500-50507177	1,042,629.99
First Federal #4100010869	671,592.06
First Federal #4100010877	0.00
First Federal #4100010885	292,163.13
First Federal #4100010893	520,406.70

COAST TO COAST LEASING, LLC

Balance Sheet

As of December 31, 2023

	TOTAL
M&T Equipment Finance Corp #107131	174,200.69
Peoples 10 reefers #102781	0.00
Peoples 10 reefers #104041	0.00
Peoples #106252	377,720.00
Peoples 10 reefers #105643	689,663.82
PNC Equipment Finance #212221	587,954.31
Siemens #20013405	1,335,924.43
Sumitomo MFL#47639-26146	864,033.18
TBK trucks #400709224	105,737.85
TBK #400713360	979,597.59
TBK #400713556	979,903.72
TBK #400715510	2,877,765.79
TBK #400716642	1,119,948.12
TBK #400716700	1,119,174.13
TBK #400717394	947,184.17
TBK #400717418	945,805.67
TBK 15 reefers #400710116	0.00
Total Notes Payable	18,307,713.66
Total Long-Term Liabilities	\$18,307,713.66
Total Liabilities	\$18,307,713.66
Equity	
Members Capital	-2,988,568.34
Net Income	2,782,184.17
Total Equity	\$ -206,384.17
TOTAL LIABILITIES AND EQUITY	\$18,101,329.49

2022 Partnership Return
prepared for:

COAST TO COAST LEASING, LLC
566 ROCK ROAD DR., UNIT 3
EAST DUNDEE, IL 60118

KOSTOV & ASSOCIATES PC
444 N. NORTHWEST HWY SUITE 200
PARK RIDGE, IL 60068

KOSTOV & ASSOCIATES PC
444 N. NORTHWEST HWY SUITE 200
PARK RIDGE, IL 60068
8477204630

September 14, 2023

COAST TO COAST LEASING, LLC
566 ROCK ROAD DR., UNIT 3
EAST DUNDEE, IL 60118

Dear Client:

Your 2022 Federal Partnership Income Tax return will be electronically filed with the Internal Revenue Service upon receipt of a signed Form 8879PE - IRS e-file Signature Authorization. No tax is payable with the filing of this return.

Your 2022 Illinois Partnership Return of Income will be electronically filed with the State of Illinois. No tax is payable with the filing of this return.

You must distribute a copy of the 2022 Schedule K-1 to each member, if applicable. Be sure to give each member a copy of the Partner's Instructions for Schedule K-1.

Please call if you have any questions.

Sincerely,

Chitilian Kostov, CPA

2022

Federal Income Tax Summary

Page 1

COAST TO COAST LEASING, LLC

85-4244670

	2022	2021	Diff
TRADE OR BUSINESS INCOME			
Gross receipts less returns.....	2,355,641	351,500	2,004,141
Gross profit.....	2,355,641	351,500	2,004,141
Net gain (loss) from Form 4797.....	148,010	0	148,010
Total income (loss).....	2,503,651	351,500	2,152,151
TRADE OR BUSINESS DEDUCTIONS			
Interest.....	508,213	76,850	431,363
Depreciation.....	2,527,580	2,728,874	-201,294
Other deductions.....	1,056	1,146	-90
Total deductions.....	3,036,849	2,806,870	229,979
SCHEDULE K - INCOME			
Ordinary business income (loss).....	-533,198	-2,455,370	1,922,172
SCHEDULE K - SELF-EMPLOYMENT			
Net earn. (loss) from self-employment....	-681,208	-2,455,370	1,774,162
SCHEDULE K - ALTERNATIVE MINIMUM TAX ITEMS			
Post-1986 depreciation adjustment.....	594,676	0	594,676
SCHEDULE L - BALANCE SHEET			
Beginning Assets.....	419,076	0	419,076
Beginning Liabilities and Capital.....	419,076	0	419,076
Ending Assets.....	7,192,132	419,076	6,773,056
Ending Liabilities and Capital.....	7,192,132	419,076	6,773,056

2022

Federal Balance Sheet Summary

Page 1

COAST TO COAST LEASING, LLC

85-4244670

ENDING ASSETS

Cash.....		86,469
Other current assets.....		810,801
Buildings and other assets.....	11,551,316	
Less accumulated depreciation.....	(5,256,454)	6,294,862
Total Assets.....		7,192,132

ENDING LIABILITIES & CAPITAL

Long term notes payable.....		10,180,700
Partners' capital accounts.....		-2,988,568
Total Liabilities and Capital.....		7,192,132

2022

Illinois Income Tax Summary

Page 1

COAST TO COAST LEASING, LLC

85-4244670

	2022	2021	Diff
ORDINARY INCOME ADJUSTMENTS			
Ord. inc. (loss) from U.S. Form 1065.....	-533,198	-2,455,370	1,922,172
Total income (loss).....	-533,198	-2,455,370	1,922,172
Unmodified base income (loss).....	-533,198	-2,455,370	1,922,172
Total additions.....	0	2,662,450	-2,662,450
Total subtractions.....	851,975	532,495	319,480
INCOME & REPLACEMENT TAX			
Base income (loss).....	-1,385,173	-325,415	-1,059,758
Base income/net loss alloc. to Illinois.	-1,385,173	-325,415	-1,059,758
Net income.....	-1,385,173	-325,415	-1,059,758
Net replacement tax.....	0	0	0
Pass-Thru withholding payments.....	0	0	0
Pass-Thru entity income.....	0	0	0
Pass-Thru entity tax.....	0	0	0
Net taxes and pass-thru W/H.....	0	0	0
Underpayment of estimated tax penalty....	0	0	0
Total taxes and penalty.....	0	0	0
REFUND OR AMOUNT DUE			
Overpayment.....	0	0	0
Overpmt. credited to next year's taxes...	0	0	0
Tax due.....	0	0	0

2022

General Information

Page 1

COAST TO COAST LEASING, LLC

85-4244670

Forms needed for this return

Federal: 1065, Sch B-2, Sch K-1, Sch M-3, 4562, 4797, 7004, 8879-PE, Elections
Illinois: IL-1065, Sch B, IL-4562, Sch K-1-P, EF Jurat/Debit Authorization

Carryovers to 2023

Illinois Carryovers

NLD Carryover

1,710,588.

Form **7004**

(Rev. December 2018)

Department of the Treasury
Internal Revenue Service**Application for Automatic Extension of Time To File Certain
Business Income Tax, Information, and Other Returns**

► File a separate application for each return.
► Go to www.irs.gov/Form7004 for instructions and the latest information.

OMB No. 1545-0233

**Print
or
Type**

Name

COAST TO COAST LEASING, LLC

Number, street, and room or suite no. (If P.O. box, see instructions.)

566 ROCK ROAD DR., UNIT 3

City, town, state, and ZIP code (If a foreign address, enter city, province or state, and country (follow the country's practice for entering postal code).)

EAST DUNDEE, IL 60118

Identifying number

85-4244670

Note: File request for extension by the due date of the return. See instructions before completing this form.**Part I Automatic Extension for Certain Business Income Tax, Information, and Other Returns. See instructions.**

1 Enter the form code for the return listed below that this application is for. 09

Application Is For:	Form Code	Application Is For:	Form Code
Form 706-GS(D)	01	Form 1120-ND (section 4951 taxes)	20
Form 706-GS(T)	02	Form 1120-PC	21
Form 1041 (bankruptcy estate only)	03	Form 1120-POL	22
Form 1041 (estate other than a bankruptcy estate)	04	Form 1120-REIT	23
Form 1041 (trust)	05	Form 1120-RIC	24
Form 1041-N	06	Form 1120S	25
Form 1041-QFT	07	Form 1120-SF	26
Form 1042	08	Form 3520-A	27
Form 1065	09	Form 8612	28
Form 1066	11	Form 8613	29
Form 1120	12	Form 8725	30
Form 1120-C	34	Form 8804	31
Form 1120-F	15	Form 8831	32
Form 1120-FSC	16	Form 8876	33
Form 1120-H	17	Form 8924	35
Form 1120-L	18	Form 8928	36
Form 1120-ND	19		

Part II All Filers Must Complete This Part

- 2 If the organization is a foreign corporation that does not have an office or place of business in the United States, check here. ☐
- 3 If the organization is a corporation and is the common parent of a group that intends to file a consolidated return, check here. ☐
If checked, attach a statement listing the name, address, and employer identification number (EIN) for each member covered by this application.
- 4 If the organization is a corporation or partnership that qualifies under Regulations section 1.6081-5, check here. ☐
- 5a The application is for calendar year 20 22, or tax year beginning _____, 20 __, and ending _____, 20 __
- b Short tax year. If this tax year is less than 12 months, check the reason: ☐ Initial return ☐ Final return
☐ Change in accounting period ☐ Consolidated return to be filed ☐ Other (See instructions – attach explanation.)

6 Tentative total tax	6	0.
7 Total payments and credits. See instructions.	7	0.
8 Balance due. Subtract line 7 from line 6. See instructions.	8	0.

BAA For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

CPCZ0701L 08/09/18

Form 7004 (Rev. 12-2018)

Form **1065**Department of the Treasury
Internal Revenue Service**U.S. Return of Partnership Income**For calendar year 2022, or tax year beginning _____, 2022,
ending _____, 20 ____.Go to www.irs.gov/Form1065 for instructions and the latest information.

OMB No. 1545-0123

2022**A** Principal business activityLEASING**B** Principal product or serviceEQUIPMENT LEASE**C** Business code number532400Type
or
PrintCOAST TO COAST LEASING, LLC
566 ROCK ROAD DR., UNIT 3
EAST DUNDEE, IL 60118**D** Employer identification no.85-4244670**E** Date business started1/01/2021**F** Total assets (see instructions)\$ 7,192,132.**G** Check applicable boxes: (1) ☐ Initial return (2) ☐ Final return (3) ☐ Name change (4) ☐ Address change (5) ☐ Amended return**H** Check accounting method: (1) ☐ Cash (2) ☒ Accrual (3) ☐ Other (specify): _____**I** Number of Schedules K-1. Attach one for each person who was a partner at any time during the tax year: 3**J** Check if Schedules C and M-3 are attached: ☐**K** Check if partnership: (1) ☐ Aggregated activities for section 465 at-risk purposes (2) ☐ Grouped activities for section 469 passive activity purposes**Caution:** Include only trade or business income and expenses on lines 1a through 22 below. See the instructions for more information.

INCOME	1 a Gross receipts or sales	1 a	<u>2,355,641.</u>	
	b Returns and allowances	1 b		
	c Balance. Subtract line 1b from line 1a	1 c	<u>2,355,641.</u>	
	2 Cost of goods sold (attach Form 1125-A)	2		
	3 Gross profit. Subtract line 2 from line 1c	3	<u>2,355,641.</u>	
	4 Ordinary income (loss) from other partnerships, estates, and trusts (attach statement)	4		
	5 Net farm profit (loss) (attach Schedule F (Form 1040))	5		
	6 Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797)	6	<u>148,010.</u>	
7 Other income (loss) (attach statement)	7			
8 Total income (loss). Combine lines 3 through 7	8	<u>2,503,651.</u>		
SEE INSTRUCTIONS FOR DEDUCTIONS	9 Salaries and wages (other than to partners) (less employment credits)	9		
	10 Guaranteed payments to partners	10		
	11 Repairs and maintenance	11		
	12 Bad debts	12		
	13 Rent	13		
	14 Taxes and licenses	14		
	15 Interest (see instructions)	15	<u>508,213.</u>	
	16 a Depreciation (if required, attach Form 4562)	16 a	<u>2,527,580.</u>	
	b Less depreciation reported on Form 1125-A and elsewhere on return	16 b		
	16 c	<u>2,527,580.</u>		
	17 Depletion (Do not deduct oil and gas depletion.)	17		
	18 Retirement plans, etc.	18		
19 Employee benefit programs	19			
20 Other deductions (att stmt)	20	<u>See Statement 1</u>	<u>1,056.</u>	
21 Total deductions. Add the amounts shown in the far right column for lines 9 through 20	21	<u>3,036,849.</u>		
22 Ordinary business income (loss). Subtract line 21 from line 8	22	<u>-533,198.</u>		
TAX AND PAYMENT	23 Interest due under the look-back method — completed long-term contracts (attach Form 8697)	23		
	24 Interest due under the look-back method — income forecast method (attach Form 8866)	24		
	25 BBA AAR imputed underpayment (see instructions)	25		
	26 Other taxes (see instructions)	26		
	27 Total balance due. Add lines 23 through 26	27		
	28 Payment (see instructions)	28		
	29 Amount owed. If line 28 is smaller than line 27, enter amount owed	29		
	30 Overpayment. If line 28 is larger than line 27, enter overpayment	30		

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than partner or limited liability company member) is based on all information of which preparer has any knowledge.

Signature of partner or limited liability company member

Date

May the IRS discuss this return with the preparer shown below? See instructions. ☒ Yes ☐ No**Paid Preparer Use Only**

Print/Type preparer's name

Preparer's signature

Date

Check ☐ if self-employed

PTIN

Chtilian Kostov, CPAChtilian Kostov, CPAP00682154Firm's name KOSTOV & ASSOCIATES PCFirm's EIN 47-2058201Firm's address 444 N. NORTHWEST HWY SUITE 200Phone no. 8477204630PARK RIDGE, IL 60068

Form 1065 (2022) COAST TO COAST LEASING, LLC

85-4244670

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Schedule B Other Information

1 What type of entity is filing this return? Check the applicable box:				Yes	No
a <input type="checkbox"/> Domestic general partnership	b <input type="checkbox"/> Domestic limited partnership				
c <input checked="" type="checkbox"/> Domestic limited liability company	d <input type="checkbox"/> Domestic limited liability partnership				
e <input type="checkbox"/> Foreign partnership	f <input type="checkbox"/> Other: _____				
2 At the end of the tax year:					
a Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization, or any foreign government own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership.					X
b Did any individual or estate own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership.					X
3 At the end of the tax year, did the partnership:					
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (iv) below.					X
(i) Name of Corporation		(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage Owned in Voting Stock	
b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below.					X
(i) Name of Entity		(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital
4 Does the partnership satisfy all four of the following conditions?				Yes	No
a The partnership's total receipts for the tax year were less than \$250,000.					
b The partnership's total assets at the end of the tax year were less than \$1 million.					
c Schedules K-1 are filed with the return and furnished to the partners on or before the due date (including extensions) for the partnership return.					
d The partnership is not filing and is not required to file Schedule M-3. If "Yes," the partnership is not required to complete Schedules L, M-1, and M-2; item F on page 1 of Form 1065; or item L on Schedule K-1.					X
5 Is this partnership a publicly traded partnership, as defined in section 469(k)(2)?					X
6 During the tax year, did the partnership have any debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt?					X
7 Has this partnership filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide information on any reportable transaction?					X
8 At any time during calendar year 2022, did the partnership have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country.					X
9 At any time during the tax year, did the partnership receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," the partnership may have to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts. See instructions.					X
10a Is the partnership making, or had it previously made (and not revoked), a section 754 election? See instructions for details regarding a section 754 election.					X
b Did the partnership make for this tax year an optional basis adjustment under section 743(b) or 734(b)? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instructions.					X
c Is the partnership required to adjust the basis of partnership assets under section 743(b) or 734(b) because of a substantial built-in loss (as defined under section 743(d)) or substantial basis reduction (as defined under section 734(d))? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instructions.					X

Form 1065 (2022) COAST TO COAST LEASING, LLC

85-4244670

Page 3

Schedule B Other Information (continued)

	Yes	No
11 Check this box if, during the current or prior tax year, the partnership distributed any property received in a like-kind exchange or contributed such property to another entity (other than disregarded entities wholly owned by the partnership throughout the tax year) <input type="checkbox"/>		
12 At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other undivided interest in partnership property?		X
13 If the partnership is required to file Form 8858, Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs), enter the number of Forms 8858 attached. See instructions		
14 Does the partnership have any foreign partners? If "Yes," enter the number of Forms 8805, Foreign Partner's Information Statement of Section 1446 Withholding Tax, filed for this partnership. . . .		X
15 Enter the number of Forms 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached to this return		
16a Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions.		X
b If "Yes," did you or will you file required Form(s) 1099?		
17 Enter the number of Forms 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations, attached to this return.		
18 Enter the number of partners that are foreign governments under section 892. <u>0</u>		
19 During the partnership's tax year, did the partnership make any payments that would require it to file Forms 1042 and 1042-S under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474)?		X
20 Was the partnership a specified domestic entity required to file Form 8938 for the tax year? See the Instructions for Form 8938.		X
21 Is the partnership a section 721(c) partnership, as defined in Regulations section 1.721(c)-1(b)(14)?		X
22 During the tax year, did the partnership pay or accrue any interest or royalty for which one or more partners are not allowed a deduction under section 267A? See instructions		X
If "Yes," enter the total amount of the disallowed deductions. \$		
23 Did the partnership have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions.		X
24 Does the partnership satisfy one or more of the following? See instructions.		X
a The partnership owns a pass-through entity with current, or prior year carryover, excess business interest expense.		
b The partnership's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year are more than \$27 million and the partnership has business interest expense.		
c The partnership is a tax shelter (see instructions) and the partnership has business interest expense.		
If "Yes" to any, complete and attach Form 8990.		
25 Is the partnership attaching Form 8996 to certify as a Qualified Opportunity Fund?		X
If "Yes," enter the amount from Form 8996, line 15 \$		
26 Enter the number of foreign partners subject to section 864(c)(8) as a result of transferring all or a portion of an interest in the partnership or of receiving a distribution from the partnership.		
Complete Schedule K-3 (Form 1065), Part XIII, for each foreign partner subject to section 864(c)(8) on a transfer or distribution.		
27 At any time during the tax year, were there any transfers between the partnership and its partners subject to the disclosure requirements of Regulations section 1.707-8?		X
28 Since December 22, 2017, did a foreign corporation directly or indirectly acquire substantially all of the properties constituting a trade or business of your partnership, and was the ownership percentage (by vote or value) for purposes of section 7874 greater than 50% (for example, the partners held more than 50% of the stock of the foreign corporation)? If "Yes," list the ownership percentage by vote and by value. See instructions.		
Percentage: By vote: By value:		X
29 Reserved for future use		
30 Is the partnership electing out of the centralized partnership audit regime under section 6221(b)? See instructions. If "Yes," the partnership must complete Schedule B-2 (Form 1065). Enter the total from Schedule B-2, Part III, line 3 <u>3</u>	X	
If "No," complete Designation of Partnership Representative below.		

Designation of Partnership Representative (see instructions)

Enter below the information for the partnership representative (PR) for the tax year covered by this return.

Name of PR

U.S. address of PR

U.S. phone number of PR

If the PR is an entity, name of the designated individual for the PR

U.S. address of designated individual

U.S. phone number of designated individual

BAA

Form 1065 (2022)

Form 1065 (2022) COAST TO COAST LEASING, LLC

85-4244670

Page 4

Schedule K Partners' Distributive Share Items		Total amount
Income (Loss)	1 Ordinary business income (loss) (page 1, line 22)	1 -533,198.
	2 Net rental real estate income (loss) (attach Form 8825)	2
	3a Other gross rental income (loss)	3a
	b Expenses from other rental activities (attach stmt)	3b
	c Other net rental income (loss). Subtract line 3b from line 3a	3c
	4 Guaranteed payments: a Services 4a b Capital 4b	4c
	c Total. Add lines 4a and 4b	4c
	5 Interest income	5
	6 Dividends and dividend equivalents: a Ordinary dividends	6a
	b Qualified dividends 6b c Dividend equivalents 6c	
	7 Royalties	7
8 Net short-term capital gain (loss) (attach Schedule D (Form 1065))	8	
9a Net long-term capital gain (loss) (attach Schedule D (Form 1065))	9a	
b Collectibles (28%) gain (loss)	9b	
c Unrecaptured section 1250 gain (attach statement)	9c	
10 Net section 1231 gain (loss) (attach Form 4797)	10	
11 Other income (loss) (see instructions) Type:	11	
Deductions	12 Section 179 deduction (attach Form 4562)	12
	13a Contributions	13a
	b Investment interest expense	13b
	c Section 59(e)(2) expenditures: (1) Type: (2) Amount: 13c(2)	13c(2)
d Other deductions (see instructions) Type:	13d	
Self-Employment	14a Net earnings (loss) from self-employment	14a -681,208.
	b Gross farming or fishing income	14b
	c Gross nonfarm income	14c
Credits	15a Low-income housing credit (section 42(j)(5))	15a
	b Low-income housing credit (other)	15b
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	15c
	d Other rental real estate credits (see instructions) .. Type:	15d
	e Other rental credits (see instructions) .. Type:	15e
	f Other credits (see instructions) .. Type:	15f
International	16 Attach Schedule K-2 (Form 1065), Partners' Distributive Share Items—International, and check this box to indicate that you are reporting items of international tax relevance <input type="checkbox"/> See Statement 2	
Alternative Minimum Tax (AMT) Items	17a Post-1986 depreciation adjustment	17a 594,676.
	b Adjusted gain or loss	17b
	c Depletion (other than oil and gas)	17c
	d Oil, gas, and geothermal properties — gross income	17d
	e Oil, gas, and geothermal properties — deductions	17e
	f Other AMT items (attach stmt)	17f
Other Information	18a Tax-exempt interest income	18a
	b Other tax-exempt income	18b
	c Nondeductible expenses	18c
	19a Distributions of cash and marketable securities	19a
	b Distributions of other property	19b
	20a Investment income	20a
	b Investment expenses	20b
	c Other items and amounts (attach stmt) See Statement 3	
21 Total foreign taxes paid or accrued	21	

BAA

PTPA0134 07/28/22

Form 1065 (2022)

Analysis of Net Income (Loss) per Return

1	Net income (loss). Combine Schedule K, lines 1 through 11. From the result, subtract the sum of Schedule K, lines 12 through 13d, and 21.	1	-533,198.
2	Analysis by partner type:		
	(i) Corporate	(ii) Individual (active)	(iii) Individual (passive)
a	General partners...		
b	Limited partners...	-533,198.	

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash.....		40,415.		86,469.
2a	Trade notes and accounts receivable.....				
b	Less allowance for bad debts.....				
3	Inventories.....				
4	U.S. Government obligations.....				
5	Tax-exempt securities.....				
6	Other current assets (attach stmt)..... See St. 4				810,801.
7a	Loans to partners (or persons related to partners).....				
b	Mortgage and real estate loans.....				
8	Other investments (attach stmt).....				
9a	Buildings and other depreciable assets.....	3,107,535.		11,551,316.	
b	Less accumulated depreciation.....	2,728,874.	378,661.	5,256,454.	6,294,862.
10a	Depletable assets.....				
b	Less accumulated depletion.....				
11	Land (net of any amortization).....				
12a	Intangible assets (amortizable only).....				
b	Less accumulated amortization.....				
13	Other assets (attach stmt).....				
14	Total assets.....		419,076.		7,192,132.
Liabilities and Capital					
15	Accounts payable.....				
16	Mortgages, notes, bonds payable in less than 1 year.....				
17	Other current liabilities (attach stmt).....				
18	All nonrecourse loans.....				
19a	Loans from partners (or persons related to partners).....				
b	Mortgages, notes, bonds payable in 1 year or more.....		2,874,446.		10,180,700.
20	Other liabilities (attach stmt).....				
21	Partners' capital accounts.....		-2,455,370.		-2,988,568.
22	Total liabilities and capital.....		419,076.		7,192,132.

Schedule M-1 Reconciliation of Income (Loss) per Books With Analysis of Net Income (Loss) per Return

Note: The partnership may be required to file Schedule M-3. See instructions.

1	Net income (loss) per books.....	-533,198.	6	Income recorded on books this year not included on Schedule K, lines 1 through 11 (itemize):	
2	Income included on Schedule K, lines 1, 2, 3c, 5, 6a, 7, 8, 9a, 10, and 11, not recorded on books this year (itemize):		a	Tax-exempt interest .. \$	
3	Guaranteed payments (other than health insurance) ..		7	Deductions included on Schedule K, lines 1 through 13d, and 21, not charged against book income this year (itemize):	
4	Expenses recorded on books this year not included on Schedule K, lines 1 through 13d, and 21 (itemize):		a	Depreciation	\$
a	Depreciation	\$	8	Add lines 6 and 7.....	
b	Travel and entertainment	\$	9	Income (loss) (Analysis of Net Income (Loss), line 1). Subtract line 8 from line 5.....	-533,198.
5	Add lines 1 through 4.....	-533,198.			

Schedule M-2 Analysis of Partners' Capital Accounts

1	Balance at beginning of year.....	-2,455,370.	6	Distributions: a Cash.....	
2	Capital contributed: a Cash.....		b	Property.....	
	b Property.....		7	Other decreases (itemize):	
3	Net income (loss) (see instructions).....	-533,198.	8	Add lines 6 and 7.....	
4	Other increases (itemize):		9	Balance at end of year. Subtract line 8 from line 5.....	-2,988,568.
5	Add lines 1 through 4.....	-2,988,568.			

OMB No. 1545-0184

Go to www.irs.gov/Form4797 for instructions and the latest information.

2022

Attachment Sequence No. **27**

Name(s) shown on return

Identifying number

85-4244670

COAST TO COAST LEASING, LLC

- 1** Enter the gross proceeds from sales or exchanges reported to you for 2022 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20. See instructions.
- b** Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of MACRS assets
- c** Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS assets

2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)

- 3 Gain, if any, from Form 4684, line 39.....
- 4 Section 1231 gain from installment sales from Form 6252, line 26 or 37.....
- 5 Section 1231 gain or (loss) from like-kind exchanges from Form 8824.....
- 6 Gain, if any, from line 32, from other than casualty or theft.....
- 7 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows:.....

Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below.

Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.

- 8 Nonrecaptured net section 1231 losses from prior years. See instructions
- 9 Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below.
If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a
long-term capital gain on the Schedule D filed with your return. See instructions.

10 Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):

See Statement 5						148,010.
-----------------	--	--	--	--	--	----------

000 - BUCKLE UP						

- | | | | |
|----|--|-----|----------|
| 11 | Loss, if any, from line 7..... | 11 | (|
| 12 | Gain, if any, from line 7 or amount from line 8, if applicable..... | 12 | |
| 13 | Gain, if any, from line 31..... | 13 | |
| 14 | Net gain or (loss) from Form 4684, lines 31 and 38a..... | 14 | |
| 15 | Ordinary gain from installment sales from Form 6252, line 25 or 36..... | 15 | |
| 16 | Ordinary gain or (loss) from like-kind exchanges from Form 8824..... | 16 | |
| 17 | Combine lines 10 through 16..... | 17 | 148,010. |
| 18 | For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below. | | |
| a | If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions..... | | |
| b | Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 (Form 1040), Part I, line 4..... | 18a | |
| | | 18b | |

BAA For Paperwork Reduction Act Notice, see separate instructions.

Form 4797 (2022)

**SCHEDULE B-2
(Form 1065)**

December 2018)

Department of the Treasury
Internal Revenue Service

Name of partnership

**Election Out of the Centralized
Partnership Audit Regime**

► Attach to Form 1065 or Form 1066.

► Go to www.irs.gov/Form1065 for the instructions and the latest information.

OMB No. 1545-0123

COAST TO COAST LEASING, LLC

Employer identification number (EIN)

85-4244670

Certain partnerships with 100 or fewer partners can elect out of the centralized partnership audit regime if each partner is an individual, a C corporation, a foreign entity that would be treated as a C corporation were it domestic, an S corporation, or an estate of a deceased partner. For purposes of determining whether the partnership has 100 or fewer partners, the partnership must include all shareholders of any S corporation that is a partner. By completing Part I, you are making an affirmative statement that all of the partners in the partnership are eligible partners under section 6221(b)(1)(C) and you have provided all of the information on this schedule. See the instructions, including the instructions for the treatment of real estate mortgage investment conduits (REMICs), for more details.

Part I List of Eligible Partners

Use the following codes under Type of Eligible Partner:

I – Individual C – Corporation E – Estate of Deceased Partner

F – Eligible Foreign Entity S – S corporation

Name of Partner	Taxpayer Identification Number (TIN)	Type of Eligible Partner (Code)
1 HRISTO ANGELOV	-0360	I
2 PETAR TRENDAFILOV	-4161	I
3 PETAR PANTELEYMONOV	-0565	I
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		

Continued on Part IV

Part II List of S Corporation Shareholders (For each S corporation partner, complete a separate Part II and separate Part V, if needed.)

Use the following codes under Type of Person:

I – Individual E – Estate of Deceased Shareholder T – Trust O – Other

Name of S Corporation Partner ▶		TIN of Partner ▶	
	Name of Shareholder	Shareholder TIN	Type of Person (Code)
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			

Continued on Part V

Part III Total Number of Schedules K-1 Required To Be Issued. See Instructions.

1	Total of Part I and all Parts IV Schedules K-1 required to be issued by the partnership	1	3
2	Total of Part II and all Parts V Schedules K-1 required to be issued by any S corporation partners	2	
3	Total. Add line 1 and line 2	3	3

Note: If line 3 is more than 100, the partnership cannot make the election under section 6221(b).

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 1065.

PTPA1401 10/16/18

Schedule B-2 (Form 1065) (12-2018)

651121

OMB No. 1545-0123

Schedule K-1
(Form 1065)Department of the Treasury
Internal Revenue Service**2022**

For calendar year 2022, or tax year

beginning / / 2022 ending / /**Partner's Share of Income, Deductions, Credits, etc.**
See separate instructions.**Part I Information About the Partnership**

- A** Partnership's employer identification number
85-4244670
- B** Partnership's name, address, city, state, and ZIP code

COAST TO COAST LEASING, LLC
566 ROCK ROAD DR., UNIT 3
EAST DUNDEE, IL 60118
- C** IRS center where partnership filed return: e-file
- D** ☐ Check if this is a publicly traded partnership (PTP)

Part II Information About the Partner

- E** Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)
0360
- F** city, state, and ZIP code for partner entered in E. See instructions.

HRISTO ANGELOV
112 RAVINE LN
NORTH BARRINGTON, IL 60010
- G** ☒ General partner or LLC member-manager ☐ Limited partner or other LLC member
- H1** ☒ Domestic partner ☐ Foreign partner
- H2** ☐ If the partner is a disregarded entity (DE), enter the partner's:
TIN Name
- I1** What type of entity is this partner? Individual
- I2** If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here ☐
- J** Partner's share of profit, loss, and capital (see instructions):
- | | Beginning | Ending |
|---------|-----------|---------|
| Profit | 33.34 % | 33.34 % |
| Loss | 33.34 % | 33.34 % |
| Capital | 33.34 % | 33.34 % |
- Check if decrease is due to sale or exchange of partnership interest ☐

K Partner's share of liabilities:

	Beginning	Ending
Nonrecourse	\$	\$
Qualified nonrecourse financing	\$	\$
Recourse	\$ 958,340.	\$ 3,394,245.

Check this box if item K includes liability amounts from lower-tier partnerships. ☐**L Partner's Capital Account Analysis**

Beginning capital account	\$ -818,620.
Capital contributed during the year	\$
Current year net income (loss)	\$ -177,768.
Other increase (decrease) (attach explanation)	\$
Withdrawals and distributions	\$ ()
Ending capital account	\$ -996,388.

- M** Did the partner contribute property with a built-in gain (loss)?
☐ Yes ☒ No If "Yes," attach statement. See instructions.

N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)

Beginning	\$
Ending	\$

☐ Final K-1☐ Amended K-1**Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items**

1	Ordinary business income (loss) -177,768.	14	Self-employment earnings (loss) A -227,114.
2	Net rental real estate income (loss)		
3	Other net rental income (loss)	15	Credits
4a	Guaranteed payments for services		
4b	Guaranteed payments for capital	16	Schedule K-3 is attached if checked. <input type="checkbox"/>
4c	Total guaranteed payments	17	Alternative minimum tax (AMT) items A 198,264.
5	Interest income		
6a	Ordinary dividends		
6b	Qualified dividends	18	Tax-exempt income and nondeductible expenses
6c	Dividend equivalents		
7	Royalties		
8	Net short-term capital gain (loss)	19	Distributions
9a	Net long-term capital gain (loss)		
9b	Collectibles (28%) gain (loss)		
9c	Unrecaptured section 1250 gain	20	Other information N* STMT
10	Net section 1231 gain (loss)	Z*	STMT
11	Other income (loss)		
12	Section 179 deduction	21	Foreign taxes paid or accrued
13	Other deductions		
22	<input type="checkbox"/> More than one activity for at-risk purposes*		
23	<input type="checkbox"/> More than one activity for passive activity purposes*		

*See attached statement for additional information.

For IRS Use Only

COAST TO COAST LEASING, LLC 85-4244670

Schedule K-1 (Form 1065) 2022

Supplemental Information

Page 2

Box 20, Code N
Business Interest Expense
Included as a Deduction on the Following Line(s)

Below is deductible business interest expense for inclusion
in the separate loss class for computing any basis limitation
(defined in section 704(d), Regulation section 1.163(j)-6(h)).

Schedule K-1, line 1..... \$ 169,439.

Supplemental Information

This partner will not receive Schedule K-3 from the partnership unless the
partner requests the schedule.

Pursuant to IRC Section 6221(b) (1), for the current tax year, the partnership has
elected out of the centralized partnership audit regime. Any IRS audit conducted,
and any subsequent assessment, will be made at the partner level, partner by
partner, and under the audit procedures applicable to each partner for the year
under examination.

Partner 1: HRISTO ANGELOV 669-34-0360

Statement A—QBI Pass-through Entity Reporting (Schedule K-1, Box 20, Code Z)

Partnership's name: COAST TO COAST LEASING, LLC		Partnership's EIN: 85-4244670	
Partner's name: HRISTO ANGELOV		Partner's identifying number: [REDACTED]-0360	

	COAST TO COAST LEASING, LLC		
Partner's share of:	<input type="checkbox"/> PTP	<input type="checkbox"/> PTP	<input type="checkbox"/> PTP
	<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated
	<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB

QBI or qualified PTP items subject to partner-specific determinations:

	Ordinary business income (loss)	-177,768.	
	Rental income (loss)		
	Royalty income (loss)		
	Section 1231 gain (loss)		
	Other income (loss)		
	Section 179 deduction		
	Other deductions		
W-2 wages			
UBIA of qualified property		3,851,208.	
Qualified REIT dividends			

Partner's share of:	<input type="checkbox"/> PTP	<input type="checkbox"/> PTP	<input type="checkbox"/> PTP
	<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated
	<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB

QBI or qualified PTP items subject to partner-specific determinations:

	Ordinary business income (loss)		
	Rental income (loss)		
	Royalty income (loss)		
	Section 1231 gain (loss)		
	Other income (loss)		
	Section 179 deduction		
	Other deductions		
W-2 wages			
UBIA of qualified property			

651121

OMB No. 1545-0123

Schedule K-1

(Form 1065)

Department of the Treasury
Internal Revenue Service**2022**

For calendar year 2022, or tax year

beginning / / 2022 ending / /

Partner's Share of Income, Deductions, Credits, etc.

See separate instructions.

Part I Information About the Partnership

A Partnership's employer identification number
85-4244670

B Partnership's name, address, city, state, and ZIP code

COAST TO COAST LEASING, LLC
566 ROCK ROAD DR., UNIT 3
EAST DUNDEE, IL 60118

C IRS center where partnership filed return: e-file

D ☐ Check if this is a publicly traded partnership (PTP)

Part II Information About the Partner

E Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)

161

F Name, address, city, state, and ZIP code for partner entered in E. See instructions.

PETAR TRENDAFILOV
622 S. MCKINLEY AVE
ARLINGTON HEIGHTS, IL 60005

G ☒ General partner or LLC member-manager ☐ Limited partner or other LLC member

H1 ☒ Domestic partner ☐ Foreign partner

H2 ☐ If the partner is a disregarded entity (DE), enter the partner's:

TIN _____ Name _____

I1 What type of entity is this partner? Individual

I2 If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here. ☐

J Partner's share of profit, loss, and capital (see instructions):

	Beginning	Ending
Profit	33.33 %	33.33 %
Loss	33.33 %	33.33 %
Capital	33.33 %	33.33 %

Check if decrease is due to sale or exchange of partnership interest. ☐

K Partner's share of liabilities:

	Beginning	Ending
Nonrecourse	\$	\$
Qualified nonrecourse financing	\$	\$
Recourse	\$ 958,053.	\$ 3,393,227.

Check this box if item K includes liability amounts from lower-tier partnerships. ☐

L Partner's Capital Account Analysis

Beginning capital account \$ -818,375.

Capital contributed during the year \$

Current year net income (loss) \$ -177,715.

Other increase (decrease) (attach explanation) ... \$

Withdrawals and distributions \$ ()

Ending capital account \$ -996,090.

M Did the partner contribute property with a built-in gain (loss)?

☐ Yes ☒ No If "Yes," attach statement. See instructions.

N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)

Beginning \$

Ending \$

☐ Final K-1☐ Amended K-1**Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items**

1	Ordinary business income (loss)	14	Self-employment earnings (loss)
	-177,715.	A	-227,047.
2	Net rental real estate income (loss)		
3	Other net rental income (loss)	15	Credits
4a	Guaranteed payments for services		
4b	Guaranteed payments for capital	16	Schedule K-3 is attached if checked. <input type="checkbox"/>
4c	Total guaranteed payments	17	Alternative minimum tax (AMT) items
5	Interest income	A	198,206.
6a	Ordinary dividends		
6b	Qualified dividends	18	Tax-exempt income and nondeductible expenses
6c	Dividend equivalents		
7	Royalties		
8	Net short-term capital gain (loss)		
9a	Net long-term capital gain (loss)	19	Distributions
9b	Collectibles (28%) gain (loss)		
9c	Unrecaptured section 1250 gain	20	Other information
10	Net section 1231 gain (loss)	N*	STMT
11	Other income (loss)	Z*	STMT
12	Section 179 deduction	21	Foreign taxes paid or accrued
13	Other deductions		
22	<input type="checkbox"/> More than one activity for at-risk purposes*		
23	<input type="checkbox"/> More than one activity for passive activity purposes*		

*See attached statement for additional information.

COAST TO COAST LEASING, LLC 85-4244670

Schedule K-1 (Form 1065) 2022

Supplemental Information

Page 2

Box 20, Code N
Business Interest Expense
Included as a Deduction on the Following Line(s)

Below is deductible business interest expense for inclusion
in the separate loss class for computing any basis limitation
(defined in section 704(d), Regulation section 1.163(j)-6(h)).

Schedule K-1, line 1..... \$ 169,387.

Supplemental Information

This partner will not receive Schedule K-3 from the partnership unless the
partner requests the schedule.

Pursuant to IRC Section 6221(b)(1), for the current tax year, the partnership has
elected out of the centralized partnership audit regime. Any IRS audit conducted,
and any subsequent assessment, will be made at the partner level, partner by
partner, and under the audit procedures applicable to each partner for the year
under examination.

Partner 2: PETAR TREDAFILOV 326-02-4161

Statement A—QBI Pass-through Entity Reporting (Schedule K-1, Box 20, Code Z)

Partnership's name: COAST TO COAST LEASING, LLC		Partnership's EIN: 85-4244670	
Partner's name: PETAR TRENDAFILOV		Partner's identifying number: [REDACTED] 4161	

	COAST TO COAST LEASING, LLC		
Partner's share of:	<input type="checkbox"/> PTP	<input type="checkbox"/> PTP	<input type="checkbox"/> PTP
	<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated
	<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB

QBI or qualified PTP items subject to partner-specific determinations:

	Ordinary business income (loss)	-177,715.	
	Rental income (loss)		
	Royalty income (loss)		
	Section 1231 gain (loss)		
	Other income (loss)		
	Section 179 deduction		
	Other deductions		
W-2 wages			
UBIA of qualified property		3,850,054.	
Qualified REIT dividends			

Partner's share of:	<input type="checkbox"/> PTP	<input type="checkbox"/> PTP	<input type="checkbox"/> PTP
	<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated	<input type="checkbox"/> Aggregated
	<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB	<input type="checkbox"/> SSTB

QBI or qualified PTP items subject to partner-specific determinations:

	Ordinary business income (loss)		
	Rental income (loss)		
	Royalty income (loss)		
	Section 1231 gain (loss)		
	Other income (loss)		
	Section 179 deduction		
	Other deductions		
W-2 wages			
UBIA of qualified property			

651121

OMB No. 1545-0123

Schedule K-1
(Form 1065)Department of the Treasury
Internal Revenue Service**2022**

For calendar year 2022, or tax year

beginning / / 2022 ending / /

Partner's Share of Income, Deductions, Credits, etc.

See separate instructions.

Part I Information About the Partnership

A Partnership's employer identification number
85-4244670

B Partnership's name, address, city, state, and ZIP code

COAST TO COAST LEASING, LLC
566 ROCK ROAD DR., UNIT 3
EAST DUNDEE, IL 60118

C IRS center where partnership filed return: e-file**D** ☐ Check if this is a publicly traded partnership (PTP)**Part II Information About the Partner****E** Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)

0565

F Name, address, city, state, and ZIP code for partner entered in E. See instructions.

PETAR PANTELEYMONOV
2319 VENTURE DR
SCHAUMBURG, IL 60173

G ☒ General partner or LLC member-manager ☐ Limited partner or other LLC member**H1** ☒ Domestic partner ☐ Foreign partner**H2** ☐ If the partner is a disregarded entity (DE), enter the partner's:

TIN _____ Name _____

I1 What type of entity is this partner? Individual**I2** If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here. ☐**J** Partner's share of profit, loss, and capital (see instructions):

	Beginning	Ending
Profit	33.33 %	33.33 %
Loss	33.33 %	33.33 %
Capital	33.33 %	33.33 %

Check if decrease is due to sale or exchange of partnership interest. ☐**K** Partner's share of liabilities:

	Beginning	Ending
Nonrecourse	\$	\$
Qualified nonrecourse financing	\$	\$
Recourse	\$ 958,053.	\$ 3,393,227.

Check this box if item K includes liability amounts from lower-tier partnerships. ☐**L Partner's Capital Account Analysis**

Beginning capital account \$ -818,375.

Capital contributed during the year \$

Current year net income (loss) \$ -177,715.

Other increase (decrease) (attach explanation) \$

Withdrawals and distributions \$ ()

Ending capital account \$ -996,090.

M Did the partner contribute property with a built-in gain (loss)?☐ Yes ☒ No If "Yes," attach statement. See instructions.**N** Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)

Beginning \$

Ending \$

☐ Final K-1☐ Amended K-1**Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items**

1	Ordinary business income (loss)	14	Self-employment earnings (loss)
	-177,715.	A	-227,047.
2	Net rental real estate income (loss)		
3	Other net rental income (loss)	15	Credits
4a	Guaranteed payments for services		
4b	Guaranteed payments for capital	16	Schedule K-3 is attached if checked. <input type="checkbox"/>
4c	Total guaranteed payments	17	Alternative minimum tax (AMT) items
5	Interest income	A	198,206.
6a	Ordinary dividends		
6b	Qualified dividends	18	Tax-exempt income and nondeductible expenses
6c	Dividend equivalents		
7	Royalties		
8	Net short-term capital gain (loss)	19	Distributions
9a	Net long-term capital gain (loss)		
9b	Collectibles (28%) gain (loss)		
9c	Unrecaptured section 1250 gain	20	Other information
10	Net section 1231 gain (loss)	N*	STMT
11	Other income (loss)	Z*	STMT
12	Section 179 deduction	21	Foreign taxes paid or accrued
13	Other deductions		
22	<input type="checkbox"/> More than one activity for at-risk purposes*		
23	<input type="checkbox"/> More than one activity for passive activity purposes*		

*See attached statement for additional information.

For IRS Use Only

COAST TO COAST LEASING, LLC 85-4244670

Schedule K-1 (Form 1065) 2022

Supplemental Information

Page 2

Box 20, Code N
Business Interest Expense
Included as a Deduction on the Following Line(s)

Below is deductible business interest expense for inclusion
in the separate loss class for computing any basis limitation
(defined in section 704(d), Regulation section 1.163(j)-6(h)).

Schedule K-1, line 1..... \$ 169,387.

Supplemental Information

This partner will not receive Schedule K-3 from the partnership unless the
partner requests the schedule.

Pursuant to IRC Section 6221(b)(1), for the current tax year, the partnership has
elected out of the centralized partnership audit regime. Any IRS audit conducted,
and any subsequent assessment, will be made at the partner level, partner by
partner, and under the audit procedures applicable to each partner for the year
under examination.

Partner 3: PETAR PANTELEYMONOV 352-98-0565

Statement A—QBI Pass-through Entity Reporting (Schedule K-1, Box 20, Code Z)

Partnership's name: COAST TO COAST LEASING, LLC		Partnership's EIN: 85-4244670	
Partner's name: PETAR PANTELEYMONOV		Partner's identifying number: [REDACTED] 0565	

	COAST TO COAST LEASING, LLC <input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB	<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB	<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB
Partner's share of:			

QBI or qualified PTP items subject to partner-specific determinations:			
	Ordinary business income (loss)	-177,715.	
	Rental income (loss)		
	Royalty income (loss)		
	Section 1231 gain (loss)		
	Other income (loss)		
	Section 179 deduction		
	Other deductions		
W-2 wages			
UBIA of qualified property		3,850,054.	
Qualified REIT dividends			

	<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB	<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB	<input type="checkbox"/> PTP <input type="checkbox"/> Aggregated <input type="checkbox"/> SSTB
Partner's share of:			

QBI or qualified PTP items subject to partner-specific determinations:			
	Ordinary business income (loss)		
	Rental income (loss)		
	Royalty income (loss)		
	Section 1231 gain (loss)		
	Other income (loss)		
	Section 179 deduction		
	Other deductions		
W-2 wages			
UBIA of qualified property			

SCHEDULE M-3
(Form 1065)(Rev. December 2021)
Department of the Treasury
Internal Revenue Service**Net Income (Loss) Reconciliation**
for Certain Partnerships

OMB No. 1545-0123

▶ Attach to Form 1065.

▶ Go to www.irs.gov/Form1065 for instructions and the latest information.

Name of partnership

Employer identification number

COAST TO COAST LEASING, LLC

85-4244670

This Schedule M-3 is being filed because (check all that apply):

- A ☐ The amount of the partnership's total assets at the end of the tax year is equal to \$10 million or more.
- B ☒ The amount of the partnership's adjusted total assets for the tax year is equal to \$10 million or more. If box B is checked, enter the amount of adjusted total assets for the tax year 10,180,700.
- C ☐ The amount of total receipts for the tax year is equal to \$35 million or more. If box C is checked, enter the total receipts for the tax year _____.
- D ☐ An entity that is a reportable entity partner with respect to the partnership owns or is deemed to own an interest of 50% or more in the partnership's capital, profit, or loss, on any day during the tax year of the partnership.

Name of Reportable Entity Partner	Identifying Number	Maximum Percentage Owned or Deemed Owned

- E ☐ Voluntary filer.

Part I Financial Information and Net Income (Loss) Reconciliation

- 1 a Did the partnership file SEC Form 10-K for its income statement period ending with or within this tax year?
☐ Yes. Skip lines 1b and 1c and complete lines 2 through 11 with respect to that SEC Form 10-K.
☒ No. Go to line 1b. See instructions if multiple non-tax-basis income statements are prepared.
- b Did the partnership prepare a certified audited non-tax-basis income statement for that period?
☐ Yes. Skip line 1c and complete lines 2 through 11 with respect to that income statement.
☒ No. Go to line 1c.
- c Did the partnership prepare a non-tax-basis income statement for that period?
☒ Yes. Complete lines 2 through 11 with respect to that income statement.
☐ No. Skip lines 2 through 3b and enter the partnership's net income (loss) per its books and records on line 4a.
- 2 Enter the income statement period: Beginning 1/01/22 Ending 12/31/22
- 3 a Has the partnership's income statement been restated for the income statement period on line 2?
☐ Yes. (If 'Yes', attach a statement and the amount of each item restated.)
☒ No.
- b Has the partnership's income statement been restated for any of the 5 income statement periods immediately preceding the period on line 2?
☐ Yes. (If 'Yes', attach a statement and the amount of each item restated.)
☒ No.

4 a Worldwide consolidated net income (loss) from income statement source identified on Part I, line 1.....	4a	-533,198.
b Indicate accounting standard used for line 4a. See instructions.		
1 <input type="checkbox"/> GAAP 2 <input type="checkbox"/> IFRS 3 <input type="checkbox"/> Section 704(b)		
4 <input checked="" type="checkbox"/> Tax-basis 5 <input type="checkbox"/> Other (specify) ▶ _____		
5 a Net income from nonincludible foreign entities (attach statement).....	5a	()
b Net loss from nonincludible foreign entities (attach statement and enter as a positive amount).....	5b	
6 a Net income from nonincludible U.S. entities (attach statement).....	6a	()
b Net loss from nonincludible U.S. entities (attach statement and enter as a positive amount).....	6b	
7 a Net income (loss) of other foreign disregarded entities (attach statement).....	7a	
b Net income (loss) of other U.S. disregarded entities (attach statement).....	7b	
8 Adjustment to eliminations of transactions between includible entities and nonincludible entities (attach statement).....	8	
9 Adjustment to reconcile income statement period to tax year (attach statement).....	9	
10 Other adjustments to reconcile to amount on line 11 (attach statement).....	10	
11 Net income (loss) per income statement of the partnership. Combine lines 4a through 10.....	11	-533,198.
Note: Part I, line 11 must equal Part II, line 26, column (a); or Form 1065, Schedule M-1, line 1. See instructions.		

- 12 Enter the total amount (not just the partnership's share) of the assets and liabilities of all entities included or removed on the following lines.

	Total Assets	Total Liabilities
a Included on Part I, line 4.....	7,192,132.	10,180,700.
b Removed on Part I, line 5.....		
c Removed on Part I, line 6.....		
d Included on Part I, line 7.....		

Form **4562**Department of the Treasury
Internal Revenue Service**Depreciation and Amortization**
(Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

2022Attachment
Sequence No. **179**

Name(s) shown on return

COAST TO COAST LEASING, LLC

Identifying number

85-4244670

Business or activity to which this form relates

Form 1065

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,080,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,700,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2021 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instrs. .	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2023. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Don't include listed property. See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2022	17	148,347.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here. <input type="checkbox"/>		

Section B — Assets Placed in Service During 2022 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property		5,179,772.	3	HY	200DB	1,726,428.
b 5-year property		4,780,899.	5	HY	200DB	652,805.
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
i Nonresidential real property			27.5 yrs	MM	S/L	
			39 yrs	MM	S/L	
				MM	S/L	

Section C — Assets Placed in Service During 2022 Tax Year Using the Alternative Depreciation System

20a Class life				S/L	
b 12-year			12 yrs	S/L	
c 30-year			30 yrs	MM	S/L
d 40-year			40 yrs	MM	S/L

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions	22	2,527,580.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

BAA For Paperwork Reduction Act Notice, see separate instructions.

FDI20812L 06/28/22

Form 4562 (2022)

2022

Federal Statements

Page 1

COAST TO COAST LEASING, LLC

85-4244670

Statement 1
Form 1065, Line 20
Other Deductions

Bank Charges.....	\$	61.
Office Expense.....		995.
Total	\$	<u>1,056.</u>

Statement 2
Form 1065, Schedule K, Line 16
Exception to Filing Schedule K-2

This partnership qualified for exception to filing Schedule K-2.

Statement 3
Form 1065, Schedule K, Line 20c
Other Reportable Items

Business Interest Expense (Informational Only for Basis Limitations)
Included as a Deduction on the Following Lines(s)

Schedule K, line 1.....	\$	508,213.
-------------------------	----	----------

Statement 4
Form 1065, Schedule L, Line 6
Other Current Assets

	<u>Beginning</u>	<u>Ending</u>
Due from Five Star Garage.....	\$ 0.	\$ 659,174.
Due from Nationwide Cargo.....	0.	102,491.
New Equipment Purchase Deposit.....	0.	49,136.
Total	\$ <u>0.</u>	\$ <u>810,801.</u>

Statement 5
Form 4797, Page 1, Part II
Ordinary Gains and Losses

<u>Description of Property</u>	<u>Date Acquired</u>	<u>Date Sold</u>	<u>Sales Price</u>	<u>Depreciation Allowed</u>	<u>Cost or Basis</u>	<u>Gain or Loss</u>
REEFER 820501	4/18/22	12/24/22	87,800.		63,708.	\$ 24,092.
REEFER 820502	4/18/22	12/24/22	87,800.		63,708.	24,092.
REEFER 820503	4/18/22	12/24/22	87,800.		63,708.	24,092.
REEFER 820504	4/18/22	12/24/22	87,800.		63,708.	24,092.
REEFER 820505	4/18/22	12/24/22	87,800.		63,708.	24,092.
REEFER 820506	4/18/22	12/24/22	87,800.		63,708.	24,092.
REEFER 820507	4/18/22	12/24/22	87,800.		63,708.	24,092.
REEFER 820508	4/18/22	12/24/22	87,800.		63,708.	24,092.
VAN 158889	4/18/22	10/07/22	43,750.		45,783.	-2,033.

2022

Federal Statements

Page 2

COAST TO COAST LEASING, LLC

85-4244670

Statement 5 (continued)
 Form 4797, Page 1, Part II
 Ordinary Gains and Losses

Description of Property	Date Acquired	Date Sold	Sales Price	Depreciation Allowed	Cost or Basis	Gain or Loss
VAN 158890	4/18/22	10/07/22	43,750.		45,783.	\$ -2,033.
VAN 158891	4/18/22	10/07/22	43,750.		45,783.	-2,033.
VAN 158892	4/18/22	10/07/22	43,750.		45,783.	-2,033.
VAN 158897	4/18/22	10/07/22	43,750.		45,783.	-2,033.
VAN 158898	4/18/22	10/07/22	43,750.		45,783.	-2,033.
VAN 158899	4/18/22	10/07/22	43,750.		45,783.	-2,033.
VAN 158900	4/18/22	10/07/22	43,750.		45,783.	-2,033.
VAN 158901	4/18/22	10/07/22	43,750.		45,783.	-2,033.
VAN 158903	4/18/22	10/07/22	43,750.		45,783.	-2,033.
VAN 896201	4/18/22	10/07/22	43,750.		45,783.	-2,033.
VAN 896202	4/18/22	10/07/22	43,750.		45,783.	-2,033.
VAN 896204	4/18/22	10/07/22	43,750.		45,783.	-2,033.
VAN 896205	4/18/22	10/07/22	43,750.		45,783.	-2,033.
VAN 896206	4/18/22	10/07/22	43,750.		45,783.	-2,033.
VAN 896207	4/18/22	10/07/22	43,750.		45,783.	-2,033.
VAN 896208	4/18/22	10/07/22	43,750.		45,783.	-2,033.
VAN 896209	4/18/22	10/07/22	43,750.		45,783.	-2,033.
VAN 896210	4/18/22	10/07/22	43,750.		45,783.	-2,033.
VAN 896211	4/18/22	10/07/22	43,750.		45,783.	-2,033.
VAN 896213	4/18/22	10/07/22	43,750.		45,783.	-2,033.
VAN 896214	4/18/22	10/07/22	43,750.		45,783.	-2,033.
					Total	\$ 148,010.

2022

General Elections

Page 1

COAST TO COAST LEASING, LLC

85-4244670

Election to Not Claim Additional Depreciation

Pursuant to IRC Section 168(k)(7), the Taxpayer hereby elects to not claim the additional depreciation deduction for the following classes of property in the tax year ended 12/31/22.

All Eligible Classes Of Property

Election to Depreciate MACRS Property under the Straight Line Method

Pursuant to IRC Section 168(b)(3)(D), the Taxpayer hereby elects to depreciate the following property placed in service in the tax year ended 12/31/22 under the straight line method.

All Eligible Classess of Property

Section 1.263(a)-1(f) De Minimis Safe Harbor Election

The Taxpayer hereby makes the de minimis safe harbor election under Regulation 1.263(a)-1(f).

COAST TO COAST LEASING, LLC
566 ROCK ROAD DR., UNIT 3
EAST DUNDEE, IL 60118
85-4244670



Illinois Department of Revenue

2022 Form IL-1065**Partnership Replacement Tax Return**

See "When should I file?" in the Form IL-1065 instructions for a list of due dates.



If this return is not for calendar year 2022, enter your fiscal tax year here.

Tax year beginning month day year, ending month day year

This form is for tax years ending on or after December 31, 2022, and before December 31, 2023.
For all other situations, see instructions to determine the correct form to use.

Enter the amount you are paying.

\$

Step 1: Identify your partnership**A** Enter your complete legal business name.If you have a name change, check this box. ☐Name: COAST TO COAST LEASING, LLC**B** Enter your mailing address.Check this box if either of the following apply: ☐

- this is your **first return**, or
- you have an **address change**.

C/O:

Mailing address: 566 ROCK ROAD DR., UNIT 3City: EAST DUNDEE State: IL ZIP: 60118**C** If this is the first or final return, check the applicable box(es).☐ First return☐ Final return (Enter the date of termination. mm dd yyyy)**D** If this is a final return because you sold this business, enter the date sold (mm dd yyyy) _____, and the new owner's FEIN. _____**E Apportionment Formulas.** Check the appropriate box or boxes and see Apportionment Formula instructions.

- ☐ Financial organizations ☐ Transportation companies
☐ Federally regulated exchanges ☐ Sales companies

F Check this box if you are:

- ☐ classified as an investment partnership
☐ classified as a publicly-traded partnership

G Check this box if you made an IRC § 761 election. ☐**H** Check this box if you are a 52/53 week filer. ☐**I** Check this box if you elected to file and pay Pass-through Entity (PTE) Tax. See instructions. ☐**J** If you are paying Pass-through Entity (PTE) Tax and you annualized your income on Form IL-2220, check this box and **attach** Form IL-2220. ☐**K** Enter your federal employer identification number (FEIN). 85-4244670**L** ☐ Check this box if you are a member of a unitary business group and are included on a Schedule UB, Combined Apportionment for Unitary Business Group. Enter the FEIN of the member who prepared the Schedule UB and **attach** it to this return.**M** Enter your North American Industry Classification System (NAICS) Code. See instructions. 532400**N** Enter the city, state, and zip code where your accounting records are kept. (Use the two-letter postal abbreviation, e.g., IL, GA, etc.)
EAST DUNDEE IL 60118

City State ZIP

O If you are making the business income election to treat all nonbusiness income as business income, check this box and enter zero on Lines 36 and 44. ☐**P** If you have completed the following, check the box and **attach** the federal form(s) to this return.

- ☐ Federal Form 8886 ☐ Federal Sch. M-3, Part II, Line 10

Q Check this box if you attached Form IL-4562. ☒**R** Check this box if you attached Illinois Schedule M (for businesses). ☐**S** Check this box if you attached Schedule 80/20. ☐**T** Check this box if you attached Schedule 1299-A. ☐**U** Check this box if your business activity is protected under Public Law 86-272. ☐**V** Check this box if you attached the Subgroup Schedule. ☐**Step 2: Figure your ordinary income or loss**

(Whole dollars only)

1 Ordinary income or loss, or equivalent from federal Schedule K. 1 -533,198.**2** Net income or loss from all rental real estate activities. 2**3** Net income or loss from other rental activities. 3**4** Portfolio income or loss. 4**5** Net IRC Section 1231 gain or loss. 5**6** All other items of income or loss that were not included in the computation of income or loss on Page 1 of U.S. Form 1065. See instructions. Identify: _____ 6**7** Add Lines 1 through 6. This is your ordinary income or loss. 7 -533,198.**Step 3: Figure your unmodified base income or loss****8** Charitable contributions. 8**9** Expense deduction under IRC Section 179. 9**10** Interest on investment indebtedness. 10**11** All other items of expense that were not deducted in the computation of ordinary income or loss on Page 1 of U.S. Form 1065. See instructions. Identify: _____ 11**12** Add Lines 8 through 11. 12**13** Subtract Line 12 from Line 7. This amount is your total unmodified base income or loss. 13 -533,198.

Attach your payment and Form IL-1065-V here.



Step 4: Figure your income or loss

- 14 Enter your unmodified base income or loss from Line 13. 14 -533,198.
 15 State, municipal, and other interest income excluded from Line 14. 15 _____
 16 Illinois taxes deducted in arriving at Line 14. See instructions. 16 _____
 17 Illinois Special Depreciation addition. **Attach** Form IL-4562. 17 _____
 18 Related-Party Expenses addition. **Attach** Schedule 80/20. 18 _____
 19 Distributive share of additions. **Attach** Schedule(s) K-1-P or K-1-T. 19 _____
 20 Guaranteed payments to partners from U.S. Form 1065. 20 _____
 21 The amount of loss distributable to a partner subject to replacement tax. **Attach** Schedule B. 21 _____
 22 Other additions. **Attach** Illinois Schedule M (for businesses). 22 _____
 23 Add Lines 14 through 22. This amount is your income or loss. 23 -533,198.

Step 5: Figure your base income or loss

- 24 Interest income from U.S. Treasury or other exempt federal obligations. 24 _____
 25 August 1, 1969, valuation limitation amount. **Attach** Schedule F. 25 _____
 26 Personal service income or reasonable allowance for compensation of partners. 26 _____
 27 Share of income distributable to a partner subject to replacement tax. **Attach** Schedule B. 27 _____
 28 River Edge Redevelopment Zone Dividend subtraction. **Attach** Schedule 1299-A. 28 _____
 29 High Impact Business Dividend subtraction. **Attach** Schedule 1299-A. 29 _____
 30 Illinois Special Depreciation subtraction. **Attach** Form IL-4562. 30 851,975.
 31 Related-Party Expenses subtraction. **Attach** Schedule 80/20. 31 _____
 32 Distributive share of subtractions. **Attach** Schedule(s) K-1-P or K-1-T. 32 _____
 33 Other subtractions. **Attach** Schedule M (for businesses). 33 _____
 34 Total subtractions. Add Lines 24 through 33. 34 851,975.
 35 **Base income or loss.** Subtract Line 34 from Line 23. 35 -1,385,173.

	A If the amount on Line 35 is derived inside Illinois only, check this box and enter the amount from Step 5, Line 35 on Step 7, Line 47. You may not complete Step 6. (You must leave Step 6, Lines 36 through 46 blank.) <input checked="" type="checkbox"/>
	B If any portion of the amount on Line 35 is derived outside Illinois, or you are a unitary filer, check this box and complete <u>all lines</u> of Step 6. (Do not leave Lines 40 through 42 blank.) See instructions. <input type="checkbox"/>

Step 6: Figure your income allocable to Illinois (Complete only if you checked the box on Line B, above.)

- 36 Nonbusiness income or loss. **Attach** Schedule NB. 36 _____
 37 Business income or loss included in Line 35 from non-unitary partnerships, partnerships included on a Schedule UB, S corporations, trusts, or estates. See instructions. 37 _____
 38 Add Lines 36 and 37. 38 _____
 39 Business income or loss. Subtract Line 38 from Line 35. 39 _____
 40 Total sales everywhere. This amount cannot be negative. 40 _____
 41 Total sales inside Illinois. This amount cannot be negative. 41 _____
 42 Apportionment factor. Divide Line 41 by Line 40. Round to six decimal places. 42 _____
 43 Business income or loss apportionable to Illinois. Multiply Line 39 by Line 42. 43 _____
 44 Nonbusiness income or loss allocable to Illinois. **Attach** Schedule NB. 44 _____
 45 Business income or loss apportionable to Illinois from non-unitary partnerships, partnerships included on a Schedule UB, S corporations, trusts, or estates. See instructions. 45 _____
 46 **Base income or loss allocable to Illinois.** Add Lines 43 through 45. 46 _____

**Step 7: Figure your net income**

- 47 Base income or net loss from Step 5, Line 35, or Step 6, Line 46. 47 -1,385,173.
- 48 Illinois net loss deduction. If Line 47 is zero or a negative amount, enter zero. **Attach** Schedule NLD. 48 0.
Check this box and attach a detailed statement if you have merged losses. ☐
- 49 Income after NLD. Subtract Line 48 from Line 47. 49 -1,385,173.
- 50 Enter the amount from Step 5, Line 35. 50 -1,385,173.
- 51 Divide Line 47 by Line 50. Round the result to six decimal places. This figure cannot be greater than one. 51 1.000000
- 52 Exemption allowance. See instructions before completing. 52 _____
- 53 **Net income.** Subtract Line 52 from Line 49. 53 -1,385,173.

Step 8: Figure the taxes, pass-through withholding, and penalty you owe

- 54 Replacement tax. Multiply Line 53 by 1.5% (.015). 54 _____
- 55 Recapture of investment credits. **Attach** Schedule 4255. 55 _____
- 56 Replacement tax before investment credits. Add Lines 54 and 55. 56 _____
- 57 Investment credits. **Attach** Form IL-477. 57 _____
- 58 **Net replacement tax.** Subtract Line 57 from Line 56. If the amount is negative, enter zero. 58 _____
- 59 Pass-through withholding you owe on behalf of your members. Enter the amount from Schedule B, Section A, Line 5. See instructions. **Attach** Schedule B. 59 _____
- 60 Pass-through entity income. See instructions. ☒ 60 _____ ☐
- 61 **Pass-through entity tax.** Multiply Line 60 by 4.95% (.0495). 61 _____
- 62 **Total net replacement tax, pass-through withholding, and pass-through entity tax you owe.** Add Lines 58, 59, and 61. 62 _____
- 63 Underpayment of estimated tax penalty from Form IL-2220. See instructions. 63 _____
- 64 **Total taxes, pass-through withholding, and penalty.** Add Lines 62 and 63. 64 _____

Step 9: Figure your refund or balance due

- 65 Payments. See instructions.
- a Credits from previous overpayments. 65a _____
- b Total payments made before the date this return is filed. 65b _____
- c Pass-through withholding reported to you. **Attach** Schedule(s) K-1-P or K-1-T. 65c _____
- d Illinois income tax withholding. **Attach** Form(s) W-2G. 65d _____
- 66 Total payments. Add Lines 65a through 65d. 66 _____
- 67 Overpayment. If Line 66 is greater than Line 64, subtract Line 64 from Line 66. 67 _____
- 68 Amount to be **credited forward**. See instructions. ☒ 68 _____ ☐
Check this box and attach a detailed statement if this carryforward is going to a different FEIN. ☐
- 69 **Refund.** Subtract Line 68 from Line 67. This is the amount to be refunded. 69 _____
- 70 **Complete to direct deposit your refund**
- Routing Number ☐ Checking or ☐ Savings
- Account Number
- 71 **Tax Due.** If Line 64 is greater than Line 66, subtract Line 66 from Line 64. This is the amount you owe. 71 _____
- Special Note ▶ Enter the amount of your payment on the top of Page 1 in the space provided.**

Step 10: Sign below - Under penalties of perjury, I state that I have examined this return and, to the best of my knowledge, it is true, correct, and complete.

Sign Here	Signature of partner	Date (mm/dd/yyyy)	MANAGING MEMBER	847-378-8917	<input checked="" type="checkbox"/> Check if the Department may discuss this return with the paid preparer shown in this step.
			Title	Phone	
Paid Preparer Use Only	Chtilian Kostov, CPA		Chtilian Kostov, CPA		<input type="checkbox"/> Check if self-employed
	Print/Type paid preparer's name		Paid preparer's signature		P00682154
	Date (mm/dd/yyyy)		Date (mm/dd/yyyy)		Paid Preparer's PTIN
	Firm's name ▶ KOSTOV & ASSOCIATES PC		Firm's FEIN ▶ 47-2058201		
	Firm's address ▶ 444 N. NORTHWEST HWY SUITE 200, PARK RIDGE IL 60068		Firm's phone ▶ 8477204630		

If a payment is enclosed, mail your Form IL-1065 to:

ILLINOIS DEPARTMENT OF REVENUE
PO BOX 19053
SPRINGFIELD IL 62794-9053

If a payment is not enclosed, mail your Form IL-1065 to:

ILLINOIS DEPARTMENT OF REVENUE
PO BOX 19031
SPRINGFIELD IL 62794-9031



Illinois Department of Revenue

2022 Schedule B**Partners' or Shareholders' Information**

Attach to your Form IL-1065 or Form IL-1120-ST.



Year ending

12 2022
Month Year

IL Attachment No. 1

COAST TO COAST LEASING, LLC

85-4244670

Enter your name as shown on your Form IL-1065 or Form IL-1120-ST.

Enter your federal employer identification number (FEIN).

Read this information first

- You must read the Schedule B instructions and complete Schedule(s) K-1-P and Schedule(s) K-1-P(3) before completing this schedule.
 - You must complete Section B of Schedule B and provide all the required information for your partners or shareholders before completing Section A of Schedule B.
- Note →** Failure to follow these instructions may delay the processing of your return or result in you receiving further correspondence from the Illinois Department of Revenue. You may also be required to submit further information to support your filing.

Section A: Total members' information (from Schedule(s) K-1-P and Schedule B, Section B)

Before completing this section you must first complete Schedule(s) K-1-P, Schedule(s) K-1-P (3) and Schedule B, Section B. You will use the amounts from those schedules when completing this section.

Totals for resident and nonresident partners or shareholders (from Schedule(s) K-1-P and Schedule B, Section B)

- Enter the total of all nonbusiness income or loss you reported on Schedule(s) K-1-P for your members. See instructions. 1 _____
- Enter the total of all income and replacement tax credits you reported on Schedule(s) K-1-P for your members. See instructions. 2 _____
- Add the amounts shown on Schedule B, Section B, Line E for all partners or shareholders on all pages for which you have checked the box indicating the entity is subject to Illinois replacement tax or an ESOP. Enter the total here. See instructions. 3 _____

Totals for nonresident partners or shareholders only (from Schedule B, Section B)

- Enter the total pass-through withholding you reported on all pages of your Schedule B, Section B, Line J for your
 - nonresident individual members. See instructions. 4a _____
 - nonresident estate members. See instructions. 4b _____
 - partnership and S corporation members. See instructions. 4c _____
 - nonresident trust members. See instructions. 4d _____
 - C corporation members. See instructions. 4e _____
- Add Line 4a through Line 4e. This is the total pass-through withholding you owe on behalf of all your nonresident partners or shareholders. This amount should match the total amount from Schedule B, Section B, Line J for all nonresident partners or shareholders on all pages. Enter the total here and on Form IL-1065 (Form IL-1065-X), Line 59, or Form IL-1120-ST (Form IL-1120-ST-X), Line 59. See instructions. 5 _____
- Enter the total pass-through entity tax credit paid on all pages of Schedule B, Section B, Line K. 6 _____
- Enter the total pass-through entity tax credit received and distributed on all pages of Schedule B, Section B, Line L. 7 _____

► Attach all pages of Schedule B, Section B behind this page.

ILSA2901L 12/15/22



Illinois Department of Revenue
2022 Schedule B



COAST TO COAST LEASING, LLC

Enter your name as shown on your Form IL-1065 or Form IL-1120-ST.

85-4244670

Enter your federal employer identification number (FEIN).

Section B: Members' information (See instructions before completing.)

	Member 1	Member 2	Member 3	Member 4
A Name	HRISTO ANGELOV	PETAR TRENDAFILOV	PETAR PANTELEYMONO	
C/O				
Address 1	112 RAVINE LN	622 S. MCKINLEY AV	2319 VENTURE DR	
Address 2				
City	NORTH BARRINGTON	ARLINGTON HEIGHTS	SCHAUMBURG	
State, ZIP	IL 60010	IL 60005	IL 60173	
B Partner or Shareholder	I	I	I	
C SSN/FEIN	0360	4161	0565	
D Subject to Illinois replacement tax or an ESOP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E Member's distributable amount of base income or loss	-461,817.	-461,678.	-461,678.	
F Excluded from pass-through withholding	R	R	R	
G Share of Illinois income subject to pass-through withholding	0.	0.	0.	
H Pass-through withholding before credits	0.	0.	0.	
I Distributable share of credits	0.	0.	0.	
J Pass-through withholding amount	0.	0.	0.	
K PTE tax credit paid to members	0.	0.	0.	
L PTE tax credit received and distributed to members	0.	0.	0.	

Note → If you have more members than space provided, attach additional copies of this page as necessary. (LSA2801L 12/16/22)



Illinois Department of Revenue

2022 IL-4562**Special Depreciation**

For tax years ending on or after December 31, 2022.

Attach to your Form IL-1120, IL-1120-ST, IL-1065, IL-1041, or IL-1040.



Year ending

12 2022
Month Year

IL Attachment No. 11

Step 1: Provide the following information

COAST TO COAST LEASING, LLC

Enter your name as shown on your return.

85-4244670

Enter your Social Security number (SSN) or federal employer identification number (FEIN).

Special Note → You must read the instructions before completing Form IL-4562. Do not use negative figures.**Step 2: Figure your Illinois special depreciation addition**

- 1 Enter the total amount claimed as a special depreciation allowance on your current federal Form 4562, Depreciation and Amortization, Lines 14 and 25, for property acquired after September 10, 2001. 1 _____
- 2 **Individuals only:** Enter the total amount claimed as a special depreciation allowance from federal Form 2106, Employee Business Expenses. 2 _____
- 3 **Last year of regular depreciation:** Enter the total amount of all Illinois depreciation subtractions claimed on this year and any prior year Forms IL-4562, Step 3, for each property. See instructions. 3 _____
- 4 Add Lines 1 through 3. This is your Illinois special depreciation addition. Enter the total here and see instructions for the list of Illinois form and line references to report this addition. 4 _____

Step 3: Figure your Illinois special depreciation subtraction

- 5 a Enter the portion of depreciation allowance claimed on federal Form 4562, for property for which you claimed bonus depreciation **equal to 30 percent** of your basis in the property. See instructions. 5a _____
- b **Individuals only:** Enter the portion of depreciation allowance claimed for bonus depreciation **equal to 30 percent** of your basis in the property. See instructions. 5b _____
- c Add Lines 5a and 5b. 5c _____
- 6 Multiply Line 5c by 42.9 percent (0.429). 6 _____
- 7 a Enter the portion of depreciation allowance claimed on federal Form 4562, for property for which you claimed bonus depreciation **equal to 50 percent** of your basis in the property. See instructions. 7a _____
- b **Individuals only:** Enter the portion of depreciation allowance claimed for bonus depreciation **equal to 50 percent** of your basis in the property. See instructions. 7b _____
- c Add Lines 7a and 7b. 7c _____
- 8 a Enter the portion of depreciation allowance claimed on federal Form 4562, for property for which you claimed bonus depreciation **equal to 80 percent** of your basis in the property. See instructions. 8a _____
- b **Individuals only:** Enter the portion of depreciation allowance claimed for bonus depreciation **equal to 80 percent** of your basis in the property. See instructions. 8b _____
- c Add Lines 8a and 8b. 8c _____
- 9 Multiply Line 8c by four (4). 9 _____
- 10 Enter the amount of federal depreciation you would have claimed if you elected not to claim bonus depreciation on your federal return. 10 851,975.
- 11 Add Lines 6, 7c, 9, and 10. 11 851,975.
- 12 **Last year of regular depreciation:** Enter the Illinois special depreciation addition reported on any prior year Form IL-4562, Step 2, Line 1 plus Line 2, for each property. See instructions. 12 _____
- 13 Add Lines 11 and 12. This is your Illinois depreciation subtraction for this year. Enter the total here and see instructions for the list of Illinois form and line references to report this subtraction. 13 851,975.

→ **Attach this form to your Illinois return.** ←

2022

ILLINOIS

Page 1

Client 21-4670P

Electronic Filing Jurat/Debit Authorization

85-4244670

X By checking the box, I agree that I have examined the return, and to the best of my knowledge it is true, correct, and complete.

X The specified authorized officer is authorizing IDOR and related financial institutions to transact any debit payment information included in the transmission. In addition, the authorized officer also consents to allowing department personnel to discuss any problems transacting the debit with the ERO, transmitter, or financial institution.

COAST TO COAST LEASING, LLC

Profit and Loss

January - December 2023

	TOTAL
Income	
Rental Income	4,411,100.00
Total Income	\$4,411,100.00
GROSS PROFIT	\$4,411,100.00
Expenses	
Depreciation	2,330,157.28
General business expenses	
Bank fees & service charges	444.00
Total General business expenses	444.00
Interest paid	1,046,848.28
Office expenses	1,349.00
Rent	
Equipment rental	29,072.90
Total Rent	29,072.90
Total Expenses	\$3,407,871.46
NET OPERATING INCOME	\$1,003,228.54
Other Income	
Gain (Loss) on Sale of Assets	1,778,955.63
Total Other Income	\$1,778,955.63
NET OTHER INCOME	\$1,778,955.63
NET INCOME	\$2,782,184.17

[If debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11 of the Bankruptcy Code, this Exhibit "A" shall be completed and attached to the petition.]

[Caption as in Form 416B]

**Attachment to Voluntary Petition for Non-Individuals Filing for
Bankruptcy under Chapter 11**

1. If any of the debtor's securities are registered under Section 12 of the Securities Exchange Act of 1934, the SEC file number is _____.

2. The following financial data is the latest available information and refers to the debtor's condition on _____.

a. Total assets _____ \$9,989,000.00

b. Total debts (including debts listed in 2.c., below) _____ \$19,167,713.12

c. Debt securities held by more than 500 holders

		Approximate number of holders:
secured <input type="checkbox"/> unsecured <input type="checkbox"/> subordinated <input type="checkbox"/>	_____	_____
secured <input type="checkbox"/> unsecured <input type="checkbox"/> subordinated <input type="checkbox"/>	_____	_____
secured <input type="checkbox"/> unsecured <input type="checkbox"/> subordinated <input type="checkbox"/>	_____	_____
secured <input type="checkbox"/> unsecured <input type="checkbox"/> subordinated <input type="checkbox"/>	_____	_____
secured <input type="checkbox"/> unsecured <input type="checkbox"/> subordinated <input type="checkbox"/>	_____	_____
d. Number of shares of preferred stock		_____
e. Number of shares common stock		_____

Comments, if any: _____

3. Brief description of debtor's business _____ Transportation _____

4. List the names of any person who directly or indirectly owns, controls, or holds, with power to vote, 5% or more of the voting securities of debtor: